

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 21 1986

OIL CON. DIV.
DIST. 3

I.

Operator
El Paso Natural Gas Company

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for listing (Check proper box)

☒ New Well	Change in Transporter of:	
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas	☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 28-5 Unit	Well No. 88M	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease # SF 079250
Location				
Unit Letter <u>E</u> : <u>1840</u> Feet From The <u>North</u> Line and <u>815</u> Feet From The <u>West</u>				
Line of Section <u>15</u> Township <u>28N</u> Range <u>5W</u> NMPM. <u>Rio Arriba</u> Coun				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

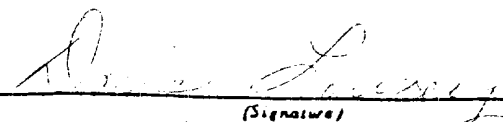
Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. <u>E</u> <u>15</u> <u>28N</u> <u>5W</u>
Is gas actually connected?	No

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Drilling Clerk
(Title)
1-20-86
(Date)

OIL CONSERVATION DIVISION
FEB -3 1986
APPROVED
Original Signed by FRANK T. CHAVEZ
BY
TITLE SUPERVISOR DISTRICT #3

This form is to be filled in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filled for each pool in multi-completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug back	Same Res.v.	Drill
			X	X					
Date Spudded 11-9-85	Date Compl. Ready to Prod. 1-16-86	Total Depth 8059'			P.B.T.D. 8051'				
Elevations (DF, RKB, RT, GR, etc.) 6667' GL	Name of Producing Formation Blanco Mesa Verde	Top Oil/Gas Pay 5389'			Tubing Depth 6151'				
Perforations (DK) 7860, 7916, 7928, 7931, 7934, 7937, 7940, 7943, 7946, 7988, 7991,							Depth Casing shoe 8059'		
* Continued Perf's listed below TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"		13 3/8"		218'		289 cu ft			
12 1/4"		9 5/8"		3968'		631 cu ft			
8 3/4"		7" Liner		3813-6368'		359 cu ft			
6 1/4"		4 1/2" Liner		6260-8059'		278 cu ft			

V. TEST DATA AND REQUEST FOR ALLOWABLE

**Continued tubing depths to bottom of page
Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - bbls.	water - bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 2019	Length of Test SI 14 Days	Bbls. Condensate/MCF 249 MCF/D	Gravity of Condensate 0
Testing Method (puls, back pr.) Back Pressure	Tubing Pressure (Shut-In) SI 788	Casing Pressure (Shut-In) SI 942	Choke Size 3/4"

* Continued Perf's:

8006, 8009, 8012, 8015, 8034, 8037, 8046, 8049, 8051, w/1 SPZ. 2nd stage (Lower Pt.) 6010, 6023, 6035, 6051, 6073, 6078, 6083, 6163, 6166, 6176 w/1 SPZ. 3rd stage (Mass. Pt.) 5786, 5789, 5792, 5801, 5809, 5817, 5820, 5823, 5839, 5842, 5845, 5848, 5870, 5892, 5900, 5904, 5912, 5921, 5940, w/1 SPZ. 4th stage (C.H. & Menefee) 5389, 5399, 5416, 5430, 5439, 5444, 5449, 5454, 5489, 5516, 5542, 5661, 5666, 5671, 5685, 5690 w/1 SPZ.

*Continued Tubing Depth's:

(MV) 1 1/2" - 6151'
(DK) 2 3/8" - 8026'