e de la companya del companya de la companya del companya de la co	n		
HO, OF COMIES RECEIVED 15			
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C+104 Supersedes Old C+104 and C+1.1
SAHTA II.			
FILC		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND HATURAL G	NS
LAND OFFICE			
GAS			
PROBATION OFFICE			
EL PASO NATURAL	GAS CO.	·	
BOX 990, FARMING		Other (Please explain)	
vew We!!	Change in Transporter of:		1
Recompletion	Cil Dry Gas Casinghead Gas Condens	\overline{a}	
Change in Ownership	Casingless das		
change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including Fo	rmation Kind of Lease	Lease No.
RIDDLE F	2A BLANCO MES	SA VERDE State, Federal	or Fee SF 078499
Location Unit Letter J : 16	67 Feet From The South Line	and 1750 Feet From T	e_East
	wnship 28-N Range 8-		
			<u> </u>
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Officers	TER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)
EL PASO NATURAL	GAS CO.	BOX 990, FARMINGTON Address (Give address to which approve	d copy of this form is to be sent)
EL PASO NATURAL		BOX 990, FARMINGTON	i
If well produces cil or liquids, give location of tanks.	Unit Sec. Twp. Ege. J 8 28N 8W	Is gas actually connected? When	
	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.
2/3/78 Elevations (DF, RKB, RT, GR, etc.)	3/9/78 Name of Producing Formation	5042 '	5024¹ Tubing Depth
5924' GR	MV .	3939'	4986'
	40,4050,4059,4968,408 99,4308,4425,4454,452		Depth Casing Shoe
3,4629,4636,4641,46	46.4666.4679.4684.468	39.4705.4719.4733.476	3,4868,4885, sacks cement
9,4966,4992,501,7'	CASING & TUBING SIZE	о́ертн śет 215'	224 cf.
8 3/4"	7"	2677'	294 cf
6 1/4"	4 1/2" liner 2 3/8"	2540-5042 ' 4986'	440 cf tubing
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be of	ter recovery of total volume of load oil a	
DIL WELL Date First New Cil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas life	, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water - Bble.	Gas-MCF
GAS WELL		Thus Continues ANGE	Gravky of Gendenedte
Actual Prod. Teet-MCF/D	Length of Test	Bbis. Condensate/MMCF	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 477	Cosing Pressure (Shut-in) 858	Choke Siz
CERTIFICATE OF COMPLIAN			TION COMMISSION
hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	19
commission have been committed t	with and that the information given best of my knowledge and belief.	By Original Signed by A.	
_		TITLEOURERVALUE .	
M / R.	·	This form is to be filed in c	ompliance with RULE 1104.
M. J. Sills	ature)	If this is a request for allow well, this form must be accompanted tests taken on the well in accord	able for a newly drilled or despended ited by a tabulation of the deviation lance with MULE 111.
Drilling Clark	·	tests taken on the well in accord	the filled out completely for allow-

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Drilling Clerk