

OIL CONSERVATION DIVISION

P. O. BOX 2068

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-045-23772

NO. OF OTHER OWNERS	5
REGISTRATION	
FACTOR	
FILE	
USED	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NAT
REGISTRATION OFFICE	
Operator	

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico 87401

Reason(s) for filing ((check proper box))

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

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Warren	Well No. 1A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Lease	Lease No. SF077123
Location				
Unit Letter <u>J</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>East</u>				
Line of Section <u>13</u> Township <u>28-N</u> Range <u>9-W</u> , NMPM, <u>San Juan</u> County				

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	Box 289, Farmington, New Mexico	
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	Box 289, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 13
	Twp. 28-N	Rge. 9-W
	Is gas actually connected? When	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 1-1-80	Date Compl. Ready to Prod. 2-28-80		Total Depth 4990'		P.B.T.D. 4972'			
Elevations (DF, RKB, RT, GR, etc.) 5943' GL	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay 4182'		Tubing Depth 4910'			
Perforations 4182,4188,4237,4242,4261,4265,4350,4358,4370,4374,4489,4493, 4526,4551,4557,4571,4577,4583,4592,4596,4628,4633,4639,4649,4663,4668, 4694,4710,4729,4751,4784,4818,4832,4848,4877,4918'.					Depth Casing Shoe 4990'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		222'		224 cu. ft.			
8 3/4"	7"		2638'		309 cu. ft.			
6 1/4"	4 1/2" Liner		2474-4990'		440 cu. ft.			
	2 3/8"		4910'					

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	360	820	

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 above is true and complete to the best of my knowledge and belief.

Drilling Clerk

March 7, 1980

OIL CONSERVATION DIVISION

MAR 17 1980

APPROVED _____, 10 _____

BY Original Signer by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.