STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTE	O M		
SANTA FE			
PILE	_		
u.s.a.s.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATON'			
B808 47:0% 655			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

Separate Forms C-104 must be filed for each pool in multi

REQUEST FOR ALLOWABLE

AND PROMATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
I.	
El Paso Natural Gas Company	
P. O. Box 4289, Farmington, NM 87499	
Rosson(s) for tiling (Check praper cax) Other (Please regiain)	
New Well Change in Transporter of: OCT 1 7 1385	
Recompletion Oil Dry Gas	
Change in Ownership Casinghead Gas Condensate OLCON DIV	
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Weil No. Pool Name, including Formation Kind of Lease CF 0.70	ease No
Turner hughes 21A Branco Most Verte ()	330
Location 1950	
Unit Letter C : 790 Feet From The North Line and 1850 Feet From The West	
Line of Section 4 Township 27N Range 9W , NMPM, San Juan	Count
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of little form to be	entj
El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casingneed Gas or Dry Gas Address (Give address to which approved copy of this form is to be s	ent)
El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids, Grant Country Connected? If well produces oil or liquids, Grant Country Connected? If well produces oil or liquids, Grant Country Connected? No N	
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 OL CONSERVATION DIVISION D	
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. APPROVED Original Signed by FRANK T. CHAVEZ	
my knowledge and belief.	
TITLESUPERVISOR DISTRICT # 3	·
This form is to be filed in compliance with RULE 110	4.
If this is a request for allowable for a newly drilled or	deeper
(Signature) well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.	devist
Drilling Clerk / All sections of this form must be filled out completely	for all
able on new and recompleted wells.	
10-16-85 Fill out only Sections I. II. III, and VI for changes well name or number, or transporter, or other such change of	of own conditi

completed wells.

n	OII Well Gas wel	I New Weil Workover Deepen		
Designate Type of Comple	tion $-(X)$	New Well Workover Deepen	Plug Back Same Res'v. Ditt.	
Date Spuddie	Date Compl. Ready to Prod.	Total Depth		
9-8-85	10-15-85	5913'	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top OU/Gas Pay	5905'	
7106' GL	Blanco Mesa Verde	54801	Tubing Depth 5793 '	
		702, 5716, 5753, 5782, 5818 90, 5512, 5515, 5520, 5524	David Carry	
536,5542,5547,5554 w/1	SPZ. TUBING, CASING, A	ND CEMENTING RECORD	5913'	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
12 1/4"	9 5/8"	223'	SACKS CEMENT	
8 3/4"	7"	3555'	136 cu ft	
6 1/4"	4 1/2" Liner	3355-5913'	408 cu ft	
	2 3/8"	5793'	443 cu ft	
TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load oil depth or be for full 24 hours) Producing Method (Flow, pump, gas ii)		
mgth of Test		Produced Marines (Produ. pamp. gas iii	i, eic.,	
	Tubing Pressure	Casing Pressure	Chote Size	
tual Prod. During Test	O11-8bis.	Water - abie.	Gas-MCF	
ling Method (publ. back pr.)	SI 7 Days	Bbis. Condensate/MMCF Casing Pressure (Shut-is)	Gravity of Condensate	
	414	664	Choke Size	
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