

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address
P.O. Box 289, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name Warren	Well No. 5A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Free SF	Lease No. 077123
Location Unit Letter J : 1770 Feet From The South Line and 1840 Feet From The East Line of Section 24 Township 28-N Range 9-W , NMPM, County				

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 289, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 239, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 24
	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:

3. 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 11-6-81	Date Compl. Ready to Prod. 12-9-81		Total Depth 4863'		P.B.T.D. 4846'			
Elevations (DF, RKB, RT, GR, etc.) 5850' GL	Name of Producing Formation Mesa Verde		Top/Gas Pay 4336'		Tubing Depth 4791'			
4336, 4342, 4354, 4428, 4432, 4436, 4440, 4455, 4486, 4492, 4497, 4516, 4525, 4531, 4564, 4586, 4599, 4637, 4654, 4680, 4696, 4713, 4740, 4771, 4816' w/1 SPZ.					Depth Casing Shoe 4863'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		230'		224 cf.			
8 3/4"	7"		2507'		426 cf.			
6 1/4"	4 1/2" Liner		2361-4863		438 cf.			
	2 3/8"		4791'					

4. 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 1587	Length of Test	Bbls. Condensate/MMCF	Gravel Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in) 924	Casing Pressure (shut-in) 872	Choke Size

5. 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.

A. G. Suises
(Signature)

Drilling Clerk

(Title)

December 14, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED

DEC 17 1981

Original Signed By IPAW-TH-12

SUPERVISOR DISTRICT # 3

TITLE

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