

OIL CONSERVATION DIVISION

P. O. BOX 7088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANITARY	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	
Operator	

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, New Mexico

Reason(s) for filing (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

III. DESCRIPTION OF WELL AND LEASE

Lease Name Warren A	Well No. 1A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State/Federal/for Fee	Lease No. 077112
Location				
Unit Letter C	790	Feet From The North	Line and 1710	Feet From The West
Line of Section 25	Township 28-N	Range 9-W	NMPM, San Juan	County

IV. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 289, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 289, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 25	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:

V. 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 11-14-81	Date Compl. Ready to Prod. 12-9-81	Total Depth 5017'	P.B.T.D. 4999'					
Elevations (DF, RKB, RT, GR, etc.) 6031'	Name of Producing Formation Mesa Verde	Top Gas Pay 4468'	Tubing Depth 4935'					
4468, 4568, 4573, 4578, 4583, 4588, 4597, 4602, 4631, 4636, 4656, 4666, 4671, 4676, 4707, 4746, 4764, 4803, 4829, 4862, 4906, 4944, 4962' W/1 SPZ.			Depth Casing Shoe 5017'					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	235'	224 cf.					
8 3/4"	7"	2609'	418 cf.					
6 1/4"	4 1/2" Liner	2440-5017'	452 cf.					
	2 3/8"	4935'						

VI. 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)

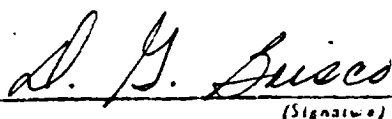
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

Actual Prod. Test-MCF/D 1120	Length of Test	Bbls. Condensate/MMCF	Gravel Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shot-in) 438	Casing Pressure (Shot-in) 812	Casing Size

VII. 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

December 14, 1981

OIL CONSERVATION DIVISION

APPROVED _____, 19____

Original Signed 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.