NO. OF COPIES RECEIVED 1 5	- 7		1
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Form C - 104
SANTA FE	1	REQUEST FOR ALLOWABLE	
FILE		AND Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE			
TRANSPORTER OIL GAS			ACTIL S
OPERATOR /			OFI FIVE
PRORATION OFFICE			/ REDELITED
Operator Nonthreat Dinoline	Cornoration		DE0 - 1071
Northwest Pipeline	Corporation		DEC 23 1975
1	mington, New Mexico 87	401	OIL CON COM
Reason(s) for filing (Check proper b	ox)	Other (Please explain)	DIST. 3
New Well	Change in Transporter of:		
Recompletion XX	Oil Dry	≒ I	
Change in Ownership	Casinghead Gas Cond	lensate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AN	D LEASE	Secretary 1992	
Lease Name	Well No. Pool Name, Including		
San Juan 29-5 Unit	6 Blanco Mesa V	Verde XXXX Feder	M 011349
=	South South	. 1650!	- West
Unit Letter K ; I	Feet From The South	ine and <u>rojo</u> Feet From	The WESL
Line of Section 27	Township 29N Range	5W , NMPM, Rio	Arriba County
	RTER OF OIL AND NATURAL G	GAS	
Name of Authorized Transporter of C	_	Address (Give address to which appr	
Northwest Pipeline Co	rporation	3539 East 30th Farm: Address (Give address to which appr	
ì	Casinghead Gas Or Dry Gas XX		
El Paso Natural Gas C	 , , 	P.O. Box 990 Farm	hen 8/4UL
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gus detadify connected?	
If this production is commingled	with that from any other lease or poo	1, give commingling order number:	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty
Designate Type of Comple		X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	12-1-75	6160'	6135'
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6799' GR	Mesa Verde	5604'	6071'
Perforations			Depth Casing Shoe
5604-6090 w/25 sho			6158'
		ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	9 5/8" (old)	162'	125
8 3/4"	7" (o1d)	5510'	500
1 6 1 1 O II	1 - 1-**	6158	
6 1/8"	4 1/2"		
	2 3/8"	6071	I and must be equal to or exceed top allo
. TEST DATA AND REQUEST	2 3/8" FOR ALLOWABLE (Test must be	after recovery of total volume of load of depth or be for full 24 hours)	
	2 3/8" FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load of	
TEST DATA AND REQUEST OIL WELL	2 3/8" FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow	lift, etc.)
TEST DATA AND REQUEST OIL WELL	2 3/8" FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	2 3/8" FOR ALLOWABLE (Test must be able for this Date of Test 12-15-75 Tubing Pressure	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure	Choke Size
TEST DATA AND REQUEST OIL, WELL Date First New Oil Bun To Tanks	Page 12-15-75	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow	lift, etc.)
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	2 3/8" FOR ALLOWABLE (Test must be able for this Date of Test 12-15-75 Tubing Pressure	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure	Choke Size
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	Por Allowable (Test must be able for this Date of Test 12-15-75 Tubing Pressure Oil-Bbls.	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure Water-Bbls.	Choke Size Gas - MCF
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	POR ALLOWABLE (Test must be able for this 12-15-75 Tubing Pressure Cil-Bbls. Length of Test	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure	Choke Size
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod, During Test GAS WELL Actual Prod, Test-MCF/D CV 1786 AOF 2222	Por Allowable (Test must be able for this 12-15-75 Tubing Pressure Cil-Bbls. Length of Test 3 hrs.	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure Water-Bbls. Bbls. Condensate/MMCF	Choke Size Gas-MCF Gravity of Condensate
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D CV 1786 AOF 2222 Testing Method (pitot, back pr.)	Por Allowable (Test must be able for this Date of Test	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Choke Size Gas-MCF Gravity of Condensate Choke Size
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D CV 1786 AOF 2222	Por Allowable (Test must be able for this Date of Test	after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas Flow Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) 853 PSIG	Choke Size Gas-MCF Gravity of Condensate

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Title)

(Date)

Production Engineer

12-22-75

DEC 23 1975 APPROVED.

ORIGINAL SIGNED BY N. F. MAXWELL, JR.

TITLE PETROLEUM ENGINEER DIST. NO. 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.