NO. OF COPIES RECEIVED		5		
DISTRIBUTION				
SANTA FE		1		
FILE		1	L	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	<u>i</u>		
	GAS	1		
OPERATOR				
			I	

	SANTA FE /		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Superseden Old C-104 and C-110			
	FILE // C	NEGOEST 1	AND	Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRAIL	SPORT OIL AND NATURAL (GAS			
	LAND OFFICE						
ì	TRANSPORTER OIL /						
	GAS /						
	OPERATOR /						
I.	PRORATION OFFICE Operator	<u> </u>					
	El Paso Natural Gas C	Company					
i	Address						
	PO Box 990, Frmingto						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well X Change in Transporter of:						
	Recompletion Oil Dry Gas Content of Content						
	Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name						
	and address of previous owner						
11.	DESCRIPTION OF WELL AND	LEASE	rmation Kind of Leas	e Lease No.			
	Lease Name						
	San Juan 29-0 Unit 107 Bashi Dakota 107 Control of the control						
	Unit Letter M : 800 Feet From The South Line and 1190 Feet From The West						
	Unit Letter M; 80	Feet From The Botter Line	e and Feet From				
	Line of Section 36 Township 29N Range 6W , NMPM, Rio Arriba County						
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S	aved copy of this form is to be sent)			
	Name of Authorized Transporter of Oil	rized Transporter of Oil or Condensate A Address (Give address to which approved copy of this form is to be se					
	El Paso Natural Gas (singhead Gas or Dry Gas X	Address (Give address to which appro				
				mington, NM 87401			
	El Paso Natural Gas (Unit Sec. Twp. P.ge.		nen			
	If well produces oil or liquids, give location of tanks.	M 36 29N 6W					
		<u></u>	give commingling order number:				
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool, a	give comminging order number.				
A V .		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completic	1 1	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 7873'	P.B.T.D. 7865'			
	4-20-72	8-2-72 Name of Producing Formation	Top Xil/Gas Pay	Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Dakota	7624'	7829'			
	6472'GL Perforations	Dakota	7021	Depth Casing Shoe			
	7624-30', 7714-26',	7758-64', 7782-88', 7804-1	0', 7840-46' 7873'				
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	13 3/4"	9 5/8''	229'	225 cu. ft.			
	8.3/4"	7"	3729'	254 cu. ft. 639 cu. ft.			
	6 1/4"	4 1/2"	7873' 7829'	tubing			
		EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for the denth or he for full 24 hours)					
V.	TEST DATA AND REQUEST F	able for this de	period of our just be made of				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)				
	Tubing Pressure Casing Pressure Choke Size		Choke Size				
	Length of Test	Tubing Pressure	Casing 1 1000	OH TIVEN			
	Actual Prod. During Test	Oil-Bble.	Water-Bbis.	Gas-MCF			
	Retual Float Burning 1001			1072			
				AUG 9 15/2			
GAS WELL			Gravity of CarolleasCON. COM.				
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	DIST. 3			
	3054	3 hours	Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	-	3/4"			
	Calc. AOF	1802	2453				
VI.	CERTIFICATE OF COMPLIAN						
I hereby certify that the rules and regulations of the Oil Conservation APPROVED ACCORDANCE NO. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			AUG 9 1972				
		with and that the information vivel	By Original Signed by Emery C. Arnold				
	above is true and complete to th	e best of my knowledge and belief.	SÚPERVISÔR DISÍ. #3				
	TITLE			of Environment			
	This form is to be filed in compliance with RULE 1104.						
				for allowable for a namiv drilled or despened			
	, - · ·	lature)	well, this form must be accomp	ordance with RULE 111.			
	Petroleum Engineer	\cup	All sections of this form m	All sections of this form must be filled out completely for allow-			

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.

(Title)

(Date)

August 4, 1972