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**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
 Northwest Pipeline Corporation
 Address: P.O. Box 90, Farmington, New Mexico 87401
 Reason(s) for filing (Check proper box):
 New Well Change In Transporter of:
 Recompletion Oil Dry Gas
 Change In Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Jaun 29-6 Unit	Well No. 7A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease XXX Federal XXX	Lease No. SF080146
Location Unit Letter E ; 1530 Feet From The North Line and 895 Feet From The West Line of Section: 34 Township 29N Range 6W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, New Mexico 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 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. 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 3-18-77	Date Compl. Ready to Prod. 4-4-77	Total Depth 5610'	P.B.T.D. 5540'					
Elevations (DF, RKB, RT, GR, etc.) 6335' GR	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4995'	Tubing Depth 5495'					
Perforations 4995' to 5535' w/22 holes	Depth Casing Shoe 5610'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8"	229'	125					
8 3/4"	7"	3603'	150					
6 1/4"	4 1/2" Liner	3461'-5610'	210					
-	2 3/8" Tubing	5495'	-					

V. 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 4-4-77	Producing Method (Flow, pump, gas lift, etc.) Flow
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

APR 12 1977
OIL CON. COM.
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D CV 5770 AOF 10,557	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 905 PSIG	Casing Pressure (shut-in) 905 PSIG	Choke Size 48/64

VI. CERTIFICATE OF COMPLIANCE

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.

D. H. Maroncelli
D.H. Maroncelli (Signature)
Production Engineer (Title)
4/7/77 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
 BY _____
 SUPERVISOR DIST. #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 completed wells.