

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-21453

NO. OF EXPLORATION	3
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
REGISTRATION OFFICE	

Operator El Paso Natural Gas Company	
Address Box 289, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change Operator	
If change of ownership give name and address of previous owner Amoco	

## II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-4 Unit	Well No. 21	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF079756-
Location Unit Letter K ; 1715 Feet From The South Line and 1785 Feet From The West Line of Section 5 Township 29-North Range 4-West, 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"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	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)
Northwest Pipeline Corporation	Box 90, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit K Sec. 5 Twp. 29-N Rge. 4-W	

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'ty.	Diff. Res'ty.
		X						
Date Spudded 9-25-78	Date Compl. Ready to Prod. 7-5-78	Total Depth 6750'	P.B.T.D. 6704'					
Elevations (DF, RKB, RT, CR, etc.) 7491' GL	Name of Producing Formation Blanco Mesa Verde	Top Oil/Gas Pay 6308'	Tubing Depth 6583'					
Perforations 6308-12, 6338-48, 6367-73, 6388-94, 6418-22, 6442-50, 6466-70, 6489-93, 6498-6504, 6526-42, 6562-6604, 6660-76.			Depth Casing Shoe 6750'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	275'	330 sk					
8 3/4"	7"	4712'	1040 sk					
6 1/4"	4 1/2" Liner	4485-6750'	300 sk					
	2 1/16"	6583'	tubing					

## 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	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	Length of Test	Bbls. Condensate/MNCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in) SI 1148	Casing Pressure (shut-in)	Choke Size

## VI. 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.

  
(Signature)

Drilling Clerk

(Title)

November 9, 1979

(Date)

## OIL CONSERVATION DIVISION

NOV 13 1979

APPROVED \_\_\_\_\_, 19

Original Signed by FRANK T. CHAVEZ

BY \_\_\_\_\_  
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 Form C-104 must be filed for each pool in multiply completed wells.