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| DISTRIBUTION           |     |       |  |
| SANTA FE               |     |       |  |
| FILE                   |     |       |  |
| U.S.G.S.               |     |       |  |
|                        |     |       |  |
| OIL                    |     |       |  |
| GAS                    |     |       |  |
| OPERATOR               |     |       |  |
|                        | OIL | OIL 1 |  |

(Title) May 12, 1978 (Date)

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| DISTRIBUTION   | NEW MEXICO OIL  | CONSERVATION COMMISSION  | Form C-104                               |
| SANTA FE   | REQUEST FOR ALLOWABLE   |  | Supersedes Old C-104 and C-11            |
| FILE   | 1   | AND  | Effective 1-1-65                         |
| U.S.G.S.   | _ AUTHORIZATION TO TR   | ANSPORT OIL AND NATURAL (  | GAS                                      |
| LAND OFFICE  | _   |  |  |
| TRANSPORTER GAS  |   |  |  |
| OPERATOR 7   | <del>- </del> "   |  |  |
| Operator Operator  |   |  |  |
| Northwest Pipel  | line Corporation  |  |  |
| P.O. Box 90, Fa  | armington, New Mexico   |  |  |
| Reason(s) for filing (Check proper both                          | Change in Transporter of:   | Other (Please explain)   | ·  |
| Recompletion   | Oil Dry G   |  |  |
| Change in Ownership  | Casinghead Gas Conde  | <del>                                      </del>                        |  |
|  |   |  |  |
| If change of ownership give name and address of previous owner   |   |  |  |
| I. DESCRIPTION OF WELL AND                                       | LEASE Well No. Pool Name, Including F                                   | Formation Kind of Leas   | e   Lease No.                            |
|  | _   | ·  |  |
| San Juan 29-6 Unit   | t 39A Blanco Mesa   | verde  |  |
|  | 50 Feet From The South Lis  | 960 5  | m. Fact                                  |
| Unit Letter I ; 165  | Feet From The Souch Li  | reet from  | The Lust                                 |
| Line of Section 22 To  | wnship 29N Range  | 6W NMPM, Rio   | Arriba County                            |
| DESCRIPTION OF THANSPOR  | TED OF OUR AND MATURAL CO   |  |  |
| I. DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oi | or Condensate   | Address (Give address to which appro                                     | ved copy of this form is to be sent;     |
| Northwest Pipeline   |   | 3539 E 30th St, Farming  | ton, New Mexico 87401                    |
| Name of Authorized Transporter of Ca                             |   | Address (Give address to which appro                                     |  |
| Northwest Pipeline   | ·   | 3539 E 30th St., Farmin  |  |
| If well produces oil or liquids,                                 | Unit Sec. Twp. Eqe.   | Is gas actually connected? Wh  | en                                       |
| give location of tanks.  | ·   | <u> </u>   |  |
|  | ith that from any other lease or pool,                                  | give commingling order number:   |  |
| 7. COMPLETION DATA   | Oil Well Gas Well   | New Well Workover Deepen   | Plug Back   Same Resty. Diff. Resty.     |
| Designate Type of Completi                                       | on = (X) X  | X  |  |
| Date Spudded   | Date Compl. Ready to Prod.  | Total Depth  | P.B.T.D.                                 |
| 4-11-78  | 5-4-78  | 5970'  | 5932'                                    |
| Elevations (DF, RKB, RT, GR, etc.)<br>6680 GR                    | Name of Producing Formation  Mesa Verde                                 | Top Cil/Gas Pay 5366'  | Tubing Depth 5868 i                      |
| Perforations   | riesa verde   | 1 3300   | Depth Casing Shoe                        |
| 5366' to 5864'; 30   | ) holes   |  | 5967'                                    |
|  |   | D CEMENTING RECORD   |  |
| HOLE SIZE  | CASING & TUBING SIZE  | DEPTH SET  | SACKS CEMENT                             |
| 12-1/4"  | 9-5/8"  | 195'   | 125                                      |
| 8-3/4"   | 7"  | 3900'  | 130                                      |
| 6-3/4"   | 4-1/2" liner  | 3807' - 5967'  | 210                                      |
| -  | 2-3/8" tbg  | 5868'  | <u> </u>                                 |
| TEST DATA AND REQUEST F  | OR ALLOWABLE (Test must be a able for this de                           | ifter recovery of total volume of load oil epth or be for full 24 hours) | and must be equal to or exceed top allow |
| OIL WELL Date First New Oil Run To Tanks                         | Date of Test  | Producing Method (Flow, pump, gas li                                     | ft, etc.)                                |
|  | 5-4-78  | Flow   |  |
| Length of Test   | Tubing Pressure   | Casing Pressure  | Choke Size                               |
|  |   |  |  |
| Actual Prod. During Test   | Oil-Bhis.   | Water-Bble.  | Gas-MCF                                  |
|  |   |  |  |
| GAS WELL   |   |  |  |
| Actual Prod. Test-MCF/D  | Length of Test  | Bbis. Condensate/MMCF  | Gravity of Condensate                    |
| CV 3974 AOF 9697   | 3 hrs   |  |  |
| Testing Method (pitot, back pr.)                                 | Tubing Pressure (Shut-in)   | Casing Pressure (Shut-in)  | Choke Size                               |
| Back Pressure  | 821 psig  | 958 ps ig  | 1 0.750"                                 |
| CERTIFICATE OF COMPLIAN  | CE  |  | ATION COMMISSION                         |
| •                          | esmilations of the Oil Communication                                    | APPROVED MA  | 15 3/3 . 19                              |
| Commission have been complied                                    | regulations of the Oil Conservation with and that the information given | Original Signed by A. R. Kendrick  |  |
| above is true and complete to the                                | e best of my knowledge and belief.                                      |  |  |
|  |   | TITLE SUPERVISOR   | DIO                                      |
| 21   | $\sim$ $\sim$   | This form is to be filed in  | compliance with RULE 1104.               |
| Bailea   | ia C. Kex   | If this is a request for allow   | vable for a newly drilled or deepened    |
| (Sign  | ature)  | well, this form must be accompa<br>tests taken on the well in accompa    | nied by a tabulation of the deviation    |
| Producti   | on Clerk  |  | ist 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.