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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

API #30-039-22534

Operator Northwest Pipeline Corporation	
Address P.O. Box 90, Farmington, N.M. 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"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-5 Unit	Well No. 100	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease XXX Federal XXX	Lease No. SE 078917
Location Unit Letter G, 1885 Feet From The North Line and 1165 Feet From The East				
Line of Section 25 Township 29N Range 5W, NMPM, Rio Arriba County				

II. 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)
Northwest Pipeline Corporation	P.O. Box 90, Farmington, N.M. 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	P.O. Box 90, Farmington, N.M. 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

V. COMPLETION DATA

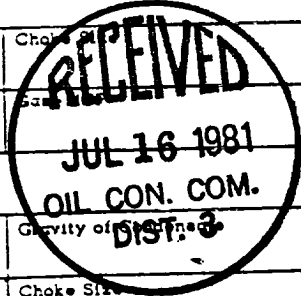
Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 4-12-81	Date Compl. Ready to Prod. 6-30-81	Total Depth 6195'	P.B.T.D. 6118' (MV)					
Elevations (DF, RKB, RT, GR, etc.) 6795' GR	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5610'	Tubing Depth 5900'					
Perforations 5610' - 6070'			Depth Casing Shoe 6195'					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8"	198'	115 SX
8-3/4"	7"	4080'	160 SX
6-3/4"	4-1/2"	3884' - 6195'	230 SX
	2-3/8"	5900'	

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 WELL Test Date 6-30-81		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D CV 2023 - AOF 2170 MCFD	Length of Test 3 hrs		
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1143 psig	Casing Pressure (Shut-in) Packer	Choke Size 2" X .750"

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.

Donna J. Brace
(Signature)

Production Clerk
(Title)

7-13-81
(Date)

OIL CONSERVATION COMMISSION
APPROVED JAN 11 1982
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 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.
Form C-104 must be filed for each well in multiple copies.