UNTRIBUTION SOURT A FE FILL U.S G.S. LAND OFFICE IRAN PORTER OIL / GAS / OPERATOR PRORATION OFFICE Operator E1 Paso Natural Gas Co	REQUEST AUTHORIZATION TO TRA	TONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL C	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
Address				
P.O. Box 289, Farmingt Reason(s) for filing (Check proper box New Wett Recompletion Change in Ownership If change of ownership give name		F5		
and address of previous owner				
	well No. Fool Name, Including Fool Name, Including Fool Same, Including Fool Name, Including	State, Federal	l or Fee	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P.O. Box 289, Farmington, New Mexico 87401 El Paso Natural Gas Company P.O. Box 289, Farmington, New Mexico 87401 El Paso Natural Gas Company P.O. Box 289, Farmington, New Mexico 87401 If well produces oil or liquids, que location of tanks. I 12 29N 7W Two				
If this production is commingled with that from any other lease or pool, give commingling order number:				
Designate Type of Completion	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff, Hes'v.	
Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
11-16-78	2-6-79	5824'	5808'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Mesa Verde	Top Cil/Gas Fay	Tubing Depth 5760'	
Perforations 5004,5010,5015,5027,5045,5063,5068,5073,5077,5181,5187,5209, Depth Casing Shoe			Depth Casing Shoe	
5345,5375,5382,5419,5425,5431,5437,5451,5456,5469,5475,5485,5492, 5824' 5499,5516,5534,5547,5608,5651,5671,5724,5747,5780'				
5499,5510,5534,554/,50	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
13 3/4"	9 5/8"	220'	224 cf	
8 3/4"	7''	3566'	288 cf	
6 1/4"	4 1/2" liner 2 3/8"	3391-5824' 5760'	424 cf tubing	
				
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Other Producing Method (Flow, pump, gas lift, etc.) Other Producing Method (Flow, pump, gas lift, etc.)				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Cil-Bbls.	Water - Bble.	Gae-MCF	
15 1979				
GAS WELL Actual Prod. Tool-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate on COM.	
Actual Prod. Teet-MCF/D	Length of lest		Gravity of Condensate ON. COM- OIL CON. 3 Choke Size	
Testing Method (pirot, back pr.)	Tubing Pressure (Shut-in) 647	Casing Pressure (Shut-in) 857	Choke Size	
CERTIFICATE OF COMPLIAN	CE		TION COMMISSION	
	44 84 8	APPROVED MAS	APPROVED	
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.		Original Signed	Original Signed by A. R. Kendrick	
		BYSUPSEVI		
		TITLE		
J. G. Brises		This form is to be filed in compliance with RULE 1104.		
N. J. Huseo		If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation		
(Signoture)		tests taken on the well in accordance with RULE 111.		
Drilling Clerk (File)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
March 5, 1979		EIN out only Sections I II	III. and VI for changes of owner,	
	ile)	well name or number, or transport	er or other such change of condition. be filed for each pool in multiply	