ФІЗТИВИТЮ NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SAH) A FG REQUEST FOR ALLOWABLE persedes Old C-104 and C-110 FILE Effective 1-1-65 U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRAN PORTER GAS OPERATOR PRORATION OFFICE EL PASO NATURAL GAS CO. BOX 289, FARMINGTON, Reason(s) for filing (Check proper box) NEW MEXICO Other (Please explain) \square New Well Recompletion CIL Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner ____ 1. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease No. Kind of Lease (State) Federal or Fee BLANCO MESA VERDE 5111-4 910 Feet From The South Line and 790 Unit Letter _ Feet From The $_{ ext{EA}}{ ext{St}}$ Township Line of Section 29N Range 7W NMPM. Rio Arriba County I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate 📉 Name of Authorized Transporter of Oil EL PASO NATURAL GAS CO. o: Authorized Transporter of Casinghead Gas BOX 289, FARMINGTON, NEW MEXICO Address (Give address to which approved copy of this form is to be sent) or Dry Gas X FARMINGTON, NEW MEXICO EL PASO NATURAL BOX 289. Twp. F.ge. If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA New Well Workover Plug Back | Same Res'y, Diff. Res'y. Deepen Designate Type of Completion - (X) Date Compl. Ready to Prod. Date Spudded Total Depth P.B.T.D. 6/17/78 10/26/78 6237 62201 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top @ Gas Pay Tubing Depth 5272' 6185' MV 5272,5282,5366,5378,5384,5390,5512,5526,5532,5552,5586,5636, 5692w/1SPZ.5805,5810,5815,5820,5846,5862,5876,5891,5898,5916,5932,5942 Depth Casing Shoe 6237**'** 5966, 5992, 6016, 6 030, 6058, 6150, TUBING, CASING, AND CEMENTING RECORD 6162, 6210 W/1 SPZ. CASING & TUBING SIZE DEPTH SET SACKS CEMENT HOLE SIZE 224 cf. 13 3/4" 9 5/8" 218' 27<u>2</u> cf 39351 8 3/4" 6 1/4" 4 1/2" liner 3789-6237 431 cf. 2 3/8" <u>6185</u> tubing (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure ष्ठाठ Oil - Bbls. Water - Bbis. Actual Prod. During Test GAS WELL anily of Condensate Actual Prod. Test-MCF/D Bala, Condensate/MMCF Length of Test Casing Freesure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) 695 OIL CONSERVATION COMMISSION 1. CERT#FICATE OF COMPLIANCE 1 APPROVED. I hereby certify that the rules and regulations of the Oil Conservation Original Signed by FRANK T. CHAVEZ Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. TITLE DEPUTY OIL & GAS WAS This form is to be filed in compliance with RULE 1104. field If this is a request for ellowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 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

Drilling Clerk

11/19/78

(Title)

(Date)