

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF WELLS	
DISTRIBUTION	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, NM 87401

Reason(s) for filing (check proper box)

New Well	☒	Change in Transporter of:		Other (Please explain)	
Recompletion	☐	Oil	☐	Dry Gas	☐
Change in Ownership	☐	Casinghead Gas	☐	Condensate	☐

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	San Juan 29-7 Unit	Well No.	60A	Pool Name, including Formation	Basin Dakota	Kind of Lease	State, Federal or Fee	SF	Lease No.	078425
Location	Unit Letter J	1840	Feet From The	South	Line and	1520	Feet From The	East		
Line of Section	34	Township	29-N	Range	7-W		NMPM,	Rio Arriba	County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent)	P.O. Box 289, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent)	P.O. Box 289, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit J Sec. 34 Twp. 29-N Rge. 7-W	Is gas actually connected?	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	8-30-80	Date Compl. Ready to Prod.	9-22-81	Total Depth	7881'	P.B.T.D.	7873'	
Elevations (DF, RKB, RT, CR, etc.)	6672' GL	Name of Producing Formation	Dakota	Top Gas Pay	7709'	Tubing Depth	7819'	
7709, 7719, 7731, 7737, 7811, 7818, 7842, 7847, 7859, 7866' W/1 SPZ.							Depth Casing Shoe	7881'

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	233'	278 cf.
12 1/4"	9 5/8"	3742'	596 cf.
8 3/4"	7"	3627-6223'	667 cf.
6 1/4"	4 1/2" 2 3/8"	6092-7881 7819'	314 cf.

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)

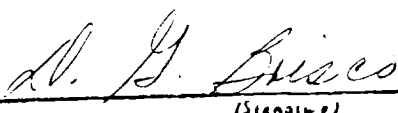
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

AS WELL

Actual Prod. Test - MCF/D	405	Length of Test		Bbls. Condensate		Gravity of Condensate	
Testing Method (spot, back pr.)	Calc. A.O.F.	Tubing Pressure (Shot-in)	735	Casing Pressure (Shot-in)		Choke Size	3/4 variable

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 is true and complete to the best of my knowledge and belief.



Drilling Clerk

September 24, 1981

OIL CONSERVATION DIVISION

APPROVED

Original Signed by CHARLES GHOLSON

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. #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 allowance 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 completed wells.