

## OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, NM 87401

Person(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## 2. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-7 Unit	Well No. 111 M	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State/Federal/for Fee	Lease No. SF 078503
Location Unit Letter <u>C</u> : <u>910</u> Feet From The <u>North</u> Line and <u>1260</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>29-N</u> Range <u>7-W</u> , NMPM, <u>Rio Arriba</u> County				

## 3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> 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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> 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 C	Sec. 31
	Twp. 29-N	Rge. 7-W

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

## 4. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12-7-80	Date Compl. Ready to Prod. 6-29-81		Total Depth 7497'		P.B.T.D. 7490'			
Elevations (DF, RKB, RT, GR, etc.) 6288' GL	Name of Producing Formation Mesa Verde		Top of Gas Pay 4362'		Tubing Depth 5558'			
6152, 5158, 5203, 5207, 5211, 5238, 5242, 5246, 5250, 5268, 5272, 5276, 5292, 5296, 5318, 5378, 5430, 5456, 5481, 5497, 5506, 5519, 5541, 5566, 5590' W/1 SPZ.					Depth Casing Shoe 7497'			
4362, 4606, 4612, 4621, 4626, 4632, 4658, 4665, 4672, 4741, 4748, 4998, 5004' W/1 SPZ.								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		231'		280 cf.			
12 1/4"	9 5/8"		3227'		758 cf.			
8 3/4"	7"		3097-5766'		688 cf.			
6 1/4"	4 1/2" 1 1/4"		5619-7497' 5558'		325 cf.			

## 5. 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

GAS WELL			
Actual Prod. Test - MCF/D 7624	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prod. back pr.) Calc. A.O.F.	Tubing Pressure (Shot-in) 914	Casing Pressure (Shot-in) 941	Choke Size

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

D. G. Suarez  
(Signature)

Drilling Clerk

(Title)

June 30, 1981

(Date)

OIL CONSERVATION DIVISION

JUL 13 1981

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT #3

TITLE

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. Separate Forms C-104 must be filed for each pool in multiply