

DATE COMPLETED	5
DESCRIPTION	
SAMPLE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRODUCTION 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

I. **Operator**
El Paso Natural Gas Company
Address
PO Box 990, Farmington, NM
Reason(s) for filing (check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Roelofs	Well No. 6	Pool Name, Including Formation Blanco Pictured Cliffs Ext.	Kind of Lease State, (Federal) Fee	Lease No. SF 078415
Location Unit Letter M ; 800 905 Feet From The South Line and 1450 1035 Feet From The West Line of Section 15 Township 29N Range 8W , NMPM, San Juan County				

III. 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) PO Box 990, Farmington, NM				
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) PO Box 990, Farmington, NM				
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 15	Twp. 29N	Rge. 8W	Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (A)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
		X	X					
Date Spudded 10-5-72	Date Compl. Ready to Prod. 5-10-73		Total Depth 3512'		P.B.T.D. 3502'			
Elevations (DF, RFB, RT, CR, etc.) 6733'GL	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3390'		Tubing Depth tubingless			
Perforations 3390-3406' and 3414-3430'				Depth Casing Shoe 3512'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		268		224 cu. ft.			
6 3/4"	2 7/8"		3512'		340 cu. ft.			
	tubingless							

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be at least 24 hours allowed 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL

Actual Prod. Test-MCF/D 1301 MCF/D	Length of Test 3 hours.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (plug, back pr.) Calc. AOF	Tubing Pressure (Shut-in) tubingless	Casing Pressure (Shut-in) 1031	Choke Size 3/4"

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.

Petroleum Engineer

May 16, 1973

OIL CONSERVATION COMMISSION

APPROVED MAY 17 1973

Original Signed by Emery C. Arnold

TITLE SUPERVISOR 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 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.