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SANTA FU		 <i>1</i>			
FILE		7	· · · · · ·		
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL GAS	/			
OPERATOR		/			
PROPATION OF					
El Paso Natural Gas					
PO Box Recson(s) for filing					

	O.G. C. P. LUCKEN	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL		Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65		
1.	TRANSPORTER OIL / GAS / OPERATOR / PROPERTION OFFICE Operator					
	El Paso Natural Gas Company					
	PO Box 990, Farmin Reason(s) for filing (Check proper bix) New Well	change in Transporter of:	Other (Please explain)	PR.		
	Recompletion Change in Ownership	OII Dry Ga Casinghead Gas Conden	7-5 1	Espiritus L		
	If change of ownership give name and address of previous owner			OIL COM TO 1		
и.	DESCRIPTION OF WELL AND LEASE					
	Lease Name Hughes Leastion	Well No. Pool Name, Including Fo				
		50 Feet From The North Lin	e and 850 Feet From	n The West		
	Line of Section 21 Tow	vaship 29N Range	8W , NMPM,	San Juan County		
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil   or Condensate   Address (Give address to which approved copy of this form is to be sent of PO Box 990, Farmington, NM 87401			mington, NM 87401		
	,	Address (Give address to which approved copy of this form is to be so natural Gas Company  PO Box 990, Farmington, NM 87401				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. E 21 29N 8W	is gas actually connected?			
	If this production is commingled wit COMPLETION DATA  Designate Type of Completion	Cil Well Gas Well	give commingling order number:  New Well Workover Deepen  X	Plug Back   Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	10-21-72 Elevations (DF, RKB, RT, GR, etc.,	12-8-72 Name of Producing Formation	3144' TopXxil/Gas Pay	3133' Tubing Depth		
	6450'GL	Pictured Cliffs	3074'	tubingless Depth Casing Shoe		
	Performions 3074-3094'		3144'			
	TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT					
	12 1/4"	8 5/8"	141'	107 cu. ft.		
	7 7/8" & 6 3/4"	2 7/8" tubingless	3144'	363 cu.ft.		
v.	TEST DATA AND REQUEST FOOL WELL	OR ALLOWARIE (Test must be a	pth or be for full 24 hours)	il and must be equal to or exceed top allow-		
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas			
	Lengtr. of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. Duting Test	Oil-Bhis.	Water - Shis.	Gas - MCF		
	GAS WELL					
	Actual Prod. Test-MCF/D 2072	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 1072	Choke Size		
VI.	Calc. AOF CERTIFICATE OF COMPLIANO	<u>tubingless</u>	OIL CONSERVATION COMMISSION			
	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.		BY Original Signed by Emery C. Arnold			
h//)			TITLE SUPERVISOR DIST. #3  This form is to be filed in compliance with RULE 1104.			
	+ 16 W 00	•	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 team taken on the well in accordance with AULE 111.			
Petroleum Engineer (Tule)			All sections of this form must be filled out completely for allowable on new and recompleted wells.			

Petroleum Engineer December 14, 1972

Fill out only Sections I. H. III, and VI for changes of owner, well name or author, or transporter or other such change of condition.