

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-11  
Effective 1-1-65

API 30-045-22719

I.

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator  
El Paso Natural Gas Company

Address  
P.O. Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hughes	Well No. 6A	Pool Name, Including Formation Blanco M.V.	Kind of Lease State, Federal or Fee	Lease No. SF 078046
Location Unit Letter J ; 1820.9 Feet From The South Line and 1600 Feet From The East				
Line of Section 21 Township 29-N Range 8-W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 289, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 289, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
J 21 29-N 8-W	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X	X					
Date Spudded 2-2-79	Date Compl. Ready to Prod. 4-23-79	Total Depth 5705'	P.B.T.D. 5689'					
Elevations (DF, RKB, RT, GR, etc.) 6381' GL	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4605'	Tubing Depth 5616'					
Perforations 4605, 4616, 4622, 4628, 4635, 4658, 4664, 4670, 4677, 4687, 4730, 4736, 4743, 4771, 4778, 4779, 4884, 4890, 4977, 4984, 5050, 5058, 5069, 5211, 5216, 5229, 5238, 5244, 5250, 5256, 5262, 5268, 5290, 5312, 5326, 5337, 5381, 5406, 5455, 5467, 5502, 5530*		Depth Casing Shoe 5705'						
HOLE SIZE 13 3/4"	CASING & TUBING SIZE 9 5/8"	DEPTH SET 218'		SACKS CEMENT 218 cf				
8 3/4"	7"	3367'		361 cf				
6 1/4"	4 1/2" liner 2 3/8"	3221-5705' 5616'		361 cf tubing				

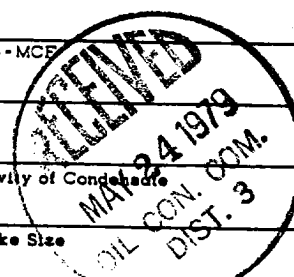
V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

(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 \*5541, 5574, 5594, 5611'.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 616	Casing Pressure (Shut-in) 703	Choke Size



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.

A. G. Quisco  
(Signature)

Drilling Clerk  
(Title)

May 22, 1979  
(Date)

OIL CONSERVATION COMMISSION  
MAY 25 1979

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DISTRICT # 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. Separate Forms C-104 must be filed for each pool in multiple