MO GE COPIES ALC			
DISTRIBUTE		i	
SANTA FE			
FILE	7	-	
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	. 1	
	GAS	1	
OPERATOR	1		
PRORATION OFFICE			
Operator			
Horthwest	t Pipo	lin	e C
Address			
	ort Di	ive	, F
Address			
Address 501 Alrp			
Address 501 Alrpa Reason(s) for filing			

	DISTRIBUTION SANTA FE FILE U.S.G.5. LAND OFFICE		NEW MEXICO OIL CO REQUEST I AUTHORIZATION TO TRA	FOR ALLOWABLE AND	Effective 1-1-	ersedes Old C-104 and C-110			
1.	TRANSPORTER OIL GAS / OPERATOR PRORATION OFFICE				·····				
	Northwest Pipeli	ine C	orporation	•					
	501 Alrport Drive, Farmington, New Mexico 87401								
	Reason(s) for filing (Check prop New Well Recompletion Change in Ownership			الختا	e explain)				
	If change of ownership give n and address of previous owne		El Paso Natural Gas Co	F-81-7), Farming	ton, New Mexic	20 87 ¹ 401.		
· II.	DESCRIPTION OF WELL	AND I	.EASE Well No. Pool Name, Including Fo	e matter	Kind of Lease		Lease No.		
	San Juan 31-6 Uni.	<u>t</u>	7 Blanco Mes	sa Verde	State, Federal	or Fee	sr 039000-		
	Unit Letter G :_	1300	Feet From The North Line	and 1800	Feet 7 rom 7	`ho	East		
	Line of Section 1	Town	nship 30N Range	7₩ , име	M, Rio Ar	rib a	County		
11.	DESIGNATION OF TRANS	PORT	ER OF OIL AND NATURAL GAS	S Nedross (Cine address	to which approv	ed convol this form is	to be sent!		
Name of Authorized Transporter of Oil or Condensate K Northwest Pipeline Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas K El Paso Natural Gas Company			Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401 Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico 87401						
	If well produces oil or liquids, give location of tanks.		Unit Sec. Twp. P.ge. G 1 30N 7W	Is gas actually connec	ted? Whe	n			
	If this production is commingl COMPLETION DATA	ed with	h that from any other lease or pool, a				1		
••	Designate Type of Com	pletion	n - (X)	New Well Workover	Deepen	Plug Back Same Re	stv. Diff. Restv.		
	Date Spudded		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
Perforations Depth Cast						Depth Casing Shoe			
	HOLE SIZE		TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECO		SACKS CE	MENT		
	HULE SIZE		CASING & LODING SIZE						
v.	TEST DATA AND REQUE	ST FO		ter recovery of total vol oth or be for full 24 how		ind must be equal to or	exceed top allow-		
	OII, WELL Date First New Oil Run To Tank	k S	Date of Test	Producing Method F		i, eic.)			
	Length of Test		Tubing Pressure	Casing Pressure	ل ان ۱ ایالیا ر	Choke Size			
	Actual Prod. During Test		Oil-Bbls.	Water-Bble. JA		Gds-MCF			
				\	CON. COM DIST. 3	/			
	Actual Prod. Test-MCF/D		Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensat	•		
	Testing Method (pitot, back pr.)	,	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size			
'I.	CERTIFICATE OF COMPI	LIANC	E	OIL	_	TION COMMISSIO	N		
	I hereby certify that the rules and regulations of the Oil Conservation			APPROVED FEB 7 1974 19					
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 A. R. Kendrick PETROLEUM ENGINEER DIST. NO. 3						
			MARIANCEN	This form is t	o be filed in c	ompliance with RUL	E 1104.		
ORIGINAL SISTRADA DA RULL. MAHAFFEY (Signature)				If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	ر مراجع	· · · · · · · · · · · · · · · · · · ·	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.						
	\$ \$ £	e)							