HO. OF COPIES RECEIVED			5	
DISTRIBUTION				
SANTA FE				
FILE			U	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	7		
	GAS	7		
OPERATOR				
SECRATION OFFICE		1	1	

III.

IV.

v.

DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  OPERATOR  PROPATION OFFICE  Operator		ONSERVATION COMMI FOR ALLOWABLE AND NSPORT OIL AND N		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
Northwest Pipel	ine Corporation			
P.O. Box 90	Farmington, New Mex	ico	87401	
Reason(s) for filing (Check proper box  New We!!  Recompletion  Change in Ownership		Other (Please	explain)	
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	LEASE			
Lease Name	Well No. Pool Name, including Fo	_	Kind of Lease State, Today, Trans	E347-26
San Juan 30-5 Unit	46   Blanco Mesa Ve	erde	AAAAAA	AA 120
	70 Feet From The North Line	e and900	Feet From The _	East
	wnship 30N Range	5W , NMPM	, <u>R</u>	io Arriba County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address	to which approved c	copy of this form is to be sent)
Name of Authorized Transporter of Oil Northwest Pipeline Cor Name of Authorized Transporter of Ca	poration singhedd Gas 🙀 or Dry Gas	3530 East 30t1	n Farmington	N.M. 87401 copy of this form is to be sent)
Northwest Pipeline Cor	Unit Sec. Twp. P.ge.	Is gas actually connect		
give location of tanks.	ith that from any other lease or pool,	<u> </u>	r number:	NA
If this production is commingled win COMPLETION DATA	Oil Well Gas Well	New Well Workover		ug Back   Same Resty. Diff. Resty.
Designate Type of Completi		x !	;	
Date Spudded	Date Compl. Ready to Prod.	Total Depth		B.T.D. COTD 6595
12-5-75	12-31-75 Name of Producing Formation	670 Top Oil/Gas Pay	·	ubing Depth
Elevations (DF, RKB, RT, GR, etc.) 7364 GR	Mesa Verde		6452 6482	
Perforations 6452' to 6478' w/1 s	shot per foot			epth Casing Shoe
	TUBING, CASING, ANI			SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH S		180
13 3/4"	9 5/8"	4520		160
8 3/4" 6 1/8"	4 1/2" Liner	Top 4336'-670		215
0 1/0	2 3/8"	6482	<u> </u>	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a shie for this d	after recovery of total vol epth or be for full 24 how	ume of load oil and: 's)	must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas lift, e	ic.)
Date ( list item est that	1-7-76		POPULATION OF THE PARTY OF THE	Choke Size
Length of Test	Tubing Pressure	Casing Pressure		note size
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	I *	de MCF
		_ <del>  J/</del>	IN 12 1976	j
GAS WELL		OIL	CON. COM.	/
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate MM	754ST.3 _}\ <sup>©</sup>	ravity of Condensate
CV 3088 AOF 4060	3 hrs.	Casing Pressure (Shu	t-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in) re 1061 PSIG	1160 PSI		3/4
One Point Back Pressu				ION COMMISSION
CERTIFICATE OF COMPLIAN	ICE		IAN 40 M	n'/ c
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	UMIT ± 26 - 5	3/0 19 in injoh
	with and that the information given ne best of my knowledge and belief.	BY	Significant and and	P la lirich

## VI.

D.H. Maroncelli (Signature)	
D.H. Maroncelli (Signature)	
Production Engineer	
(Title)	
1-8-76	

(Date)

APPROVED	JAN 12 1978		19	
APPROVED Original BY	<u> 2</u> 25 2		in drick	
		ON LUST.		

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 completed wells.