

REGISTRATION	
SANITARY	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION 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

API 30-039-21671

Operator EL PASO NATURAL GAS CO.	
Address BOX 289, FARMINGTON, NEW MEXICO	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name SAN JUAN UNIT 30-6	Well No. 56A	Pool Name, including Formation BLANCO MESA VERDE	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location				
Unit Letter P	800	Feet From The S	Line and 900	Feet From The E
Line of Section 34	Township 30N	Range 6W	NMPM, Rio Arriba	County

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 CO.	BOX 289, FARMINGTON, NEW MEXICO				
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 CO.	BOX 289, FARMINGTON, NEW MEXICO				
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 34	Twp. 30N	Rge. 6W	Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 9/30/78	Date Compl. Ready to Prod. 1/9/79	Total Depth 5009'	P.B.T.D. 5982'					
Elevations (DF, RAD, RT, GR, etc.) 6443' GL	Name of Producing Formation MV	Top Gas Pay 5228'	Tubing Depth 5932'					
Perforations 5228, 5230, 5238, 5242, 5248, 5252, 5256, 5260, 5266, 5305, 5330, 5334, 5365, 5372, w/1SPZ. 5562, 5568, 5574, 5602, 5605, 5616, 5620, 5637, 5642, 5650, 5654, 5664, 5674, 5700, 5798, 5814, 5964		Depth Casing Shoe 5999'						
5664, 5674, 5700, 5798, 5814, 5964 TUBING, CASING, AND CEMENTING RECORD w/1SPZ.								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		198'		224 cf.			
8 3/4"	7"		3638'		264 cf.			
6 1/4"	4 1/2" liner		3453-5999'		445 cf.			
	2 3/8"		5932'		tubing			

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

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	562	455	

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. Davis
(Signature)
Drilling Clerk
(Title)
1/19/79
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 24 1979, 19
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR

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.