

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

CORRECTED COPY

Operator
EL PASO NATURAL GAS CO.
Address
BOX 289, FARMINGTON, NEW MEXICO
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

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 Fee 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 ☐ or Condensate ☒ 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 ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
*** NORTHWEST PIPELINE CORPORATION BOX 90, 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.
Date Spudded 9/30/78 Date Compl. Ready to Prod. 1/9/79 Total Depth 5999' P.B.T.D. 5932'
Elevations (DF, RAB, RT, GR, etc.) 6445' 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 TUBING, CASING, AND CEMENTING RECORD w/1SPZ. Depth Casing Shoe 5999'
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 (pitot, back pr.) Tubing Pressure (Shut-in) 562 Casing Pressure (Shut-in) 455 Choke Size

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.
Drilling Clerk
1/19/79

OIL CONSERVATION COMMISSION
APPROVED
Original Signed by A. A. Henarick
BY
TITLE
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.