DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION 16rm C-104 SARTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRAN PORTER GAS OPERAION PRORATION OFFICE Literator El Paso Natural Gas Company P.O. Box 289, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) New We!! X Change in Transporter of: Other (Please explain) Recompletion CII Dry Gas Change in Ownership Castinghead Gas Condensate If change of ownership give name and address of previous owner, . DESCRIPTION OF WELL AND LEASE Pool Name, Including Formation Well No. Kind of Lease Lease No. State, Federal or Fee San Juan 30-6 Unit 89A Blanco Mesa Verde E-347-20 800 940 Feet From The South Line and 36 Township 30-N 6-W , NMPM, Rio Arriba Line of Section Range County DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | or Condensate | X | Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company Name of Authorized Transporter of Casinghead Gas P.O. Box 289, Farmington, New Mexico 87401 Address (Give address to which approved copy of this form is to be sent) or Dry Gas X P.O. Box 90, Farmington, New Mexico 87401 Northwest Pipeline Corporation Twp. P.ge. Unit if well produces oil or liquids, 30N give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plua Back Same Resty, Diff. Resty. Deepen Oll Well Gas Well New Well Workovet Designate Type of Completion -(X)X Total Depth Date Compl. Ready to Prod. P.B.T.D. Date Spudded 63061 10-19-78 1-25-79 62891 Elevations (DF, RNB, RT, GR, etc., Top 🔐/Gas Pay Tubing Depth Name of Producing Formation 6670' GL <u>Mesa Verde</u> 5533<u>'</u> 6183**'** Depth Casing Shoe Perforations 5533,5543,5547,5552,5561,5566,5570,5629,5644,5650,5656,5661, 6306' 5701,5716,5721,5862,5868,5874,5880,5886,5892,5898,5911,5923,5936,5941 5960,5966,5990,6007,6051,6095,6118,6158,6215 CASING & TUBING SIZE DEPTH SET SACKS CEMENT HOLE SIZE 13 3/4" 9 5/8" 214' 224 cf 4033' 8 3/4" <u>325 cf</u> 6 1/4" 4 1/2" 3869-6306**'** 431 cf 2 3/8" 6183 tubing TEST DATA AND REQUEST FOR ALLOWABLE (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) OH, WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tonks Date of Test Tubing Pressure Casing Pressure Cheke Size Langth of Test Water - Bbis. Gga • MCF O11 - Bb!s. Actual Prod. During Test GAS WELL Bbis. Condensate/MMCF Gravity of Condensate Length of Test Actual Frod, Toot-MCF/D Cosing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 243 OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE APPROVED_ 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. Original Signed

TITLE

Drilling Clerk

March 20, 1979

(Title)

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled o, despende well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

able on new and recompleted wells.

All enctions of this form must be filled out completely for allow-

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of concition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.