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LAND OFFICE	
TRANSPORTER	OIL ☒ GAS ☒
OPERATOR 2	
PROPORTION 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 1-1-55

1. Operator Northwest Pipeline Corporation	
Address PO Box 90, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper one): New Well ☒ Change in Transporter of: Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Ownership ☐ Gashead Gas ☐ Condensate ☐	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 30-5 Unit	Well No. Pool Name, Including Formation 63 Blanco Pictured Cliffs	Kind of Lease XXX Federal XXXX	Lease No. NM 012335
Location Unit Letter N 1190 Feet From The South Line and 1500 Feet From The West Line of Section 31 Township 30N Range 5W CONEM, Rio Arriba County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 3539 E 30th St., Farmington, New Mexico 87401
Name of Authorized Transporter of Gashead Gas ☐ or Dry Gas ☒ Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 3539 E 30th St., Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks. Unit San. Twp. Rge. Is gas actually connected? When	

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

V. 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 8-8-78	Date Compl. Ready to Prod. 6-26-79	Total Depth 3720'	P.B.T.D. 3704'
Elevations (DF, RAB, RT, GR, etc.) 6597'GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3589'	Tubing Depth Tubingless	
Perforations 3589' - 3616'; 26 holes				Depth Casing Shoe 3715'
TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 129'	SACKS CEMENT 90	
7-7/8" & 6-3/4"	2-7/8"	3715'	170	

V. 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-Bole.	Water-Bole.	Gas-MCF

GAS WELL Date of Test: 6-25-79

Actual Prod. Test-MCF/D CV 1149 AOF 1159	Length of Test 3 hrs	Bole. Condensate-M/MCF -	Gravity of Condensate -
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) Tubingless	Casing Pressure (Shut-in) 1170 psig	Choke Size 2" X 0.750"

VI. 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.

Production Clerk

July 16, 1979

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original _____
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.