

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, NM 87401

Reason(s) for filing (check proper box)

New Well ☒Recompletion ☐Change In Ownership ☐

Change In Transporter of:

Oil ☐Casinghead Gas ☐Dry 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 30-6 Unit	Well No. 86A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Free	Lease No. E-289-3
Location Unit Letter <u>J</u> : <u>1470</u> Feet From The <u>South</u> Line and <u>1700</u> Feet From The <u>East</u> Line of Section <u>36</u> Township <u>30-N</u> Range <u>7-W</u> , NMPM, <u>San Juan</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 289, Farmington, NM				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 289, Farmington, NM				
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 36	Twp. 30-N	Rge. 7-W	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 Resrv. ☐	Diff. Resrv. ☐
Date Spudded 6-20-80	Date Compl. Ready to Prod. 11-13-80		Total Depth 6345'		P.B.T.D. 6327'			
Elevations (DF, RKB, RT, GR, etc.) 6821'	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay 5539'		Tubing Depth 6259'			
5944, 5961, 5966, 5996, 6002, 6008, 6014, 6020, 6026, 6032, 6038, 6044, 5050, 6134, 6193, 6198, 6228, 6252, 6270, 6320, 5824, 5816, 5705, 5697, 5629, 5622, 5614, 5602, 5589, 5585, 5574, 5539' W/1 SPZ.					Depth Casing Shoe 5345'			
HOLE SIZE 13 3/4"	CASING & TUBING SIZE 9 5/8"		DEPTH SET 321'		SACKS CEMENT 325 cu. ft.			
8 3/4"	7"		4079'		288 cu. ft.			
6 1/4"	4 1/2"		3889-6345'		424 cu. ft.			
	2 3/8"		6259'					

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 1841	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in) 340	Casing Pressure (shut-in) 642	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Drilling Clerk

November 21, 1980

OIL CONSERVATION DIVISION

APPROVED NOV 26 1980, 19BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT #

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. Complete Form C-104 must be filed for each pool in multiple