STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE		1	
U.S.O.S.			
LAND OFFICE			
TRANSPORTER	OIL		
THE	GAB		
OPERATOR	OPERATOR		
PROBATION OFFICE		1	

OIL CONSERVATION DIVISIONDIST. 3
P. O. BOX 2088
SANTA FE, NEW MEXICO **

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

well name or number, or transporter, or other such change of condi

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

TRANSPORTER GAS	•	REQUES	ST FOR	ALLOWA	ABLE			
PROBATION OFFICE	ALITHORIS		INA DANCEC	_	AND MATI	IDAL GAS		
1	AUTHURIZ	T OT NOITAS	KANSPU	אני טוב	AND NATO	JKAL GAS		
Operator		•						
Northwest Pipeline Corpo	ration							
Address	• • • • •	07400						
P.O. Box 90, Farmington,	New Mexi	1C0 8/499						
Resson(s) for tiling (Check proper box)		_			Other (Plea:	se explain)		
New Well		Transporter of:	\Box	_				
Recompletion	C11			Gas	i i	š		
Change in Ownership	Castro	head Gas	L.J Con	densate				
If change of ownership give name and address of previous owner								
	TRACE				•			
II. DESCRIPTION OF WELL AND	Well No. 1	Pool Name, Incl	luding For	rmation		Kind of Lease		Lease N
San Juan 30-5 Unit	102	Undesign	nated	Gallup)	SYake Federal SexPes	N N	N-012332
Location								
' 1970	Fra Fin	South	t tne	and 22	2201	Feet From The	West	<u> </u>
Unit Letter : 1370	reat rion.					9		
Line of Section 34 Towns	•hip 30N	Pa	inge	5 Wes	St , NMF	_{рм,} Rio Arriba	· · · · · · · · · · · · · · · · · · ·	Coun
III. DESIGNATION OF TRANSPO	RTER OF C	IL AND NA	TURAL	GAS			(1)	11
Name of Authorized Transporter of Oil	or Co	ndensate		Address	(Give addres	s to which approved copy	of this form is	to be senty
<i>?</i>							of this form is	to be cent!
Name of Authorized Transporter of Casin		or Dry Gas	XX:			s to which approved copy		
Northwest Pipeline Corpo	oration_					Farmington, New	w Mexico c	3/433
	Unit Sec.	Twp.	Rge.	1= ga= a	ctually conne	cted? When		
If this production is commingled with	that from an	y other lease	or pool,	give com	mingling or	der number:		
						-		
NOTE: Complete Parts IV and V	on reverse si	de if necessa	<i>'7</i> 79•					•
VI. CERTIFICATE OF COMPLIAN	ICE .				OIL	CONSERVATION I	1986 ·	
I hereby certify that the rules and regulation	is of the Oil Co	nservation Divis	sion have	APPE	OVED	A	CUADITE CU	, 19
been complied with and that the information my knowledge and belief.	i given is true an	nd complete to th	ne pest or	BY_		Original Signed b		
my knowledge and benefit						DEPUTY OIL & GAS IN	SPECTOR, DIST	ſ. # 3
A				TITL	E			
+ a am		_	B	1	his form is	to be filed in complia	nce with RUL	.E 1104.
7 inda 0. 1/10	uqui	2	2			source for allowable for	or a newly dril	lled or deep
Signat	-			ll	this form w	ust be accompanied by ne well in accordance	, a tabulation	OI fue deals
Production and Drilling	Clerk				isken on th	of this form must be f	Lied out comp	letely for al
(Title	1)			able	bns wen and	recompleted wells.		
September 17, 1984				F	ill out only	y Sections I. II. III.	and VI for chi	anges of ow

(Date)

Test Date 8-29-84 Malet - Bole O11 - 991#* Actual Prod. During Test Sasing Preseute Tubing Pressure Producting Method (Flow, pump, gas lift, etc.) V. 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 allo 19669 13.11.uJ 8[[+ £48 18/6-5 18628 .11.uJ 68 + 4\s 1127F-4 ..t/L-9 11201 224 Cu.ft. Cl B. 114/6-8 ,998 SACKS CEMENT ..8/9-6 TB2 HT43C 12-1/4" CASING & TUBING SIZE ТИВІНС, САЗІНС, АНО СЕМЕНТІНС ЯЕСОВО HOLE SIZE 85931 <u> 8887-6887</u> Depth Costng Shoe EEEL, - 9489 JUDING DOPIN 19789 dullad 8858 GR 9870' KB Name of Producting Formation . 6.7.8.9 Total Depth 8293 8-15-84 bebbude amd 48-8-7

X

χ

COD MESS

2685

Cosing Pressure (Shut-12)

Bbis. Condensate/AutCF

2685

3 Hour

Length of Test

(al-juda) emeserq paidu

Back Pressure

Actual Prod. Teel-MCF/D

330 MCF MCF

sellng Melhod (puot, back pr.)

Designate Type of Completion - (X)

IV. COMPLETION DATA

Sege 2 E8-10-80 14m10-1 81-10-01 begiven 1013 moi

סונר צייי

X "S

Cyore gire

Gravity of Condensate

S	TATE	OF	NEW	MEXIC	:0
ENERGY	AND N	/INI	ERALS	DEPA	RTMENT

(Date)

PR. 07 (07100 BIG			
DISTRIBUTIO	O#		
BANTA FE		\Box	
FILE			
U.S.Q.A.			
LAND OFFICE			
TRANSPORTER	OIL		
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OPERATOR			
BECOATION OF	~-		

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

TRANSPORTER GAS RECUEST FO	OR ALLOWABLE OIL 101586 AND OIL CON. DIV.
	OII CO
PROBATION OFFICE AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS ON AND
I	DIST
Operator	·•·· 3
Northwest Pipeline Corporation	
Address	
P.O. Box 90 - Farmington, New Mexico 87499)
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion OII D	Dry Gas
Change in Ownership Casinghead Gas C	Condensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	Formation Kind of Lease Lease No.
Lease Name Well No. Pool Name, Including F	XXX. Federal 分本本 NM 01:2332
San Juan 30-5 Unit 102 Basin Dakota	MIN 01-2332
Location	
Unit Letter K : 1970 Feet From The South Li	ine and 2220 Feet From The West
Line of Section 34 Township T30N Range	R5W , NMPM. Rio Arriba County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	L GAS
Name of Authorized Transporter of Oil or Condensate	Agaress (Give address to which approved copy of this form is to be sent)
<i>₽</i> *	
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	P.O. Box 90 - Farmington, NM 87499
If well produces oil or liquids, que location of tanks.	is gas actually connected? When
	rive communating order number:
If this production is commingled with that from any other lease or pool	, give commissions of the commission of the comm
NOTE: Complete Parts IV and V on reverse side if necessary.	
	OIL CONSERVATION DIVISION
VI. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 111 22 1986
been complied with and that the information given is true and complete to the best of	Original Signed by CHARLES GHOLSON
my knowledge and belief.	BY
•	DEPUTY OIL & GAS INSPECTOR, DIST. #3
$A \rightarrow A$	
/ and de man	This form is to be filed in compliance with RULE 1104.
1 11 VIU TUM (!!	If this is a request for allowable for a newly drilled or deepen
De 1 + D 1 (Signature)	well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.
MCa. O Milg. Clar	All sections of this form must be filled out completely for allo-
7-9 01 (Title)	able on new and recompleted wells.
1-1-06	Fill out only Sections I. II. III. and VI for changes of owne

well name or number, or transporter, or other such change of condition

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

7-8-84 Elevations (DF, RKB, RT, GR, stc.) 6870 KB	Date Compl. Ready to Pi 8-15-84 Name of Producing Form		Total Depin		!	P.B.T.D.	·	<u>.</u>
Elevations (DF. RKB, RT, GR, ste.; 6870' KB	8-15-84 Name of Producing Form		1			P.B.T.D.		<u>. </u>
6870 KB	Name of Producing Form		1 029.			1		
	1			-		8275	ı	
Perforations	<u> </u>		Top OU/Gas	-		Tubing Depti	,	
	Dasin Dak	COLA	8193	3'		8145	1	•
8193'-8243' (DK)						Depth Casino		
	TUBING, C	ASING AND	CEMENTIN					
HOLE SIZE	CASING & TUBIN	C SIZE						
12-1/4"	9-5/8"	3122	!	DEPTH SET		SAC	XS CEMEN	7
8-3/4"	7"			3661		244 cu		-
6-1/4"	4-1/2"			150'		363 cu	ft.	
	2-3/8"	···		293'		661 cu		
TEST DATA AND BEOVERS	2-3/6		8	145'				
OIL WELL Date First New Ci: Run To Tanza	Cate of Test Tubing Pressure	ta jor this dep	Producing Ma	thod (Flow, p	ump, zas iift	etc.)	al to or exce	ed top al
			Casing Pressure			Choke Size		
grues Prod. During Test	O11 - 8 bis.				}			
		1	Water - Bbie.			Gas-MCF		
A C West	¥	!						
13 WELL								•
AS WELL cival Prod. Teat-MCF/D	ength of Tees							
OF=544 0=544	Length of Test 3 hrs.		Bbie. Condens	ate/MMCF		Gravity of Con	iensere	
OF=544 Q=544	Langth of Test 3 hrs. Fubing Pressure (Shut-in	,	Bbie, Condens		1	Gravity of Con		: