

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Northwest Pipeline Corporation		Well API No. 30-039-24514
Address 3539 East 30th Street - Farmington, NM 87401		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Other (Please explain) <input type="checkbox"/>		
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

RECEIVED
DEC 29 1989

OIL CON. DIV
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 31-6	Well No. 211	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fed	Lease No. E347-39 & 38
Location Unit Letter N : 1040 Feet From The South Line and 1850 Feet From The West Line Section 2 Township 30N Range 6W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corp.	3539 East 30th St. - Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 2	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:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-7-89	Date Compl. Ready to Prod. 11-21-89	Total Depth 3188'		P.B.T.D. 3176'				
Elevations (DF, RKB, RT, GR, etc.) 6357' GR	Name of Producing Formation Basin Fruitland Coal		Top Oil/Gas Pay 3059'		Tubing Depth 3153'			
Perforations 3172'-3162' 3149'-3059'			Depth Casing Shoe 3176'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-1/2"	9-5/8"		538 500' KB		280			
8-3/4"	7"		3055' KB		420			
6-1/4"	5-1/2"		3176' KB		did not cement			
	2-7/8"		3153' KB					

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 Tank	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 (pilot, back pr.) Backpressure	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) SI 1350#	Choke Size

VI. OPERATOR 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.

Signature Carrie Harmon
Carrie Harmon
Printed Name
Date 12/29/89
Title
Telephone No. 505/327-5351

OIL CONSERVATION DIVISION

Date Approved DEC 29 1989
By Original Signed by FRANK T. CHAVEZ
Title SUPERVISOR DISTRICT 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.