	h				/ .		
	DISTRIBUTION	NEW MEXICO C	DIL CONSERVATION COMMIS	SION	_		
	ANTA FE	REQUI	EST FOR ALLOWABLE	SION	Form C-104 Supersedes Old C-104 and C-110		
	FILE		AND		Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO	TRANSPORT OIL AND NA	TURAL GAS			
	LAND OFFICE			TORAL GAS			
	TRANSPORTER OIL /						
	OPERATOR /						
I.	PRORATION OFFICE Operator			··-			
	El Paso Natural Gas Company						
	P. O. Box 990, Farmington, NM 87401 Recoon(s) for filing (Check proper box)						
	New Well		Other (Please ex	plain)			
	Recompletion	Change in Transporter of:					
	Change in Ownership		y Gas				
		Castridueda Gas C	ondensate				
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AN	D LEASF. Well No. Pool Name, Including	og Formation				
	San Jacinto	10 Homfel Char	1	nd of Lease ate(Federal) or Fee	Lease No. \$F078266		
		790 Feet From The N	Line and 1650	eet From The	E		
	17	ownship 29N Range	1 OW	San Juan			
			, NMPM,		County		
III.	DESIGNATION OF TRANSPORMED OF Authorized Transporter of C	RTER OF OIL AND NATURAL or Condensate X	GAS	, . ,			
El Paso Natural Gas Company P. O. Box 990, Farmington, NM 87401							
	Name of Authorized Transporter of C	asinghead Gas or Dry Gas Y	Address (Give address to w				
	El Paso Natural Gas	Company	P. O. Box 990, F				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When	4 67401		
	If this production is commingled w	of that from any other lease or po		nhari			
IV.	COMPLETION DATA	Oil Well Gas Well					
	Designate Type of Complet	ion = (X)	10120161	eepen Plug Bac	Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	X 1	+	1		
Ì	01 10 75		Total Depth	P.B.T.D.			
Ì	01-18-75 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	3235 Top Oxl/Gas Pay	3225'			
	5693' GL	_	1 1	Tubing D	•		
ı	Perforations	Chacra	3141	Tubing			
	3141-46'				sing Shoe		
-	J141-4U	ND CEMENTING RECORD	3235'				
t	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		20010		
ı	12 1/4"	8 5/8''	110' GL		SACKS CEMENT		
1	6 3/4"	2 7/8"	3235'	106 cu 726 cu			
		Tubingless	0200	120 00			
V. 1	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be able for this	after recovery of total volume of depth or be for full 24 hours)	load oil and must be	equal to or exceed top allow-		
_	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pur	ip, gas lift, etc.)			
 	Length of Test	Tubing Pressure	Casing Pressure	Choke Siz	•		
-	Actual Prod. During Test	OU. Phile					
		Oil-Bbla.	Water - Bbls.	Gas - MCF			
	GAS WELL						
Γ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of	Condensate		
-	203 Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Coning December 4 2 2 2				
	Calc A.O.F.		Casing Pressure (Shut-in) 1095	Choke Size			

VI. CERTIFICATE OF COMPLIANCE

Drilling Clerk

June 27, 1975

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 matter will be and belief.

200

(Signature)

(Title)

(Date)

OIL CON.

) OIL	OIL CONSERVATION COMMISSION						
APPROVED	JUL 3 197	75					
BY Original Signed by Emery C. Arnold							
TITLE	SUPERVISOR		1014				

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.

Consecta Forms C-104 must be filed for each and in multiniv