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| DISTRIBUTION | |
| SANTA FE | 1 |
| FILE | 1 |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL 1 |
| | GAS 1 |
| OPERATOR | 1 |
| PRORATION 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 1-1-65

I. Operator
El Paso Natural Gas Company
Address
P. O. Box 990, Farmington, NM 87401
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Nyc Well No. 12 Pool Name, including Formation Unders. Frutland Kind of Lease State, Federal or Fee Lease No. SF078197
Location
Unit Letter F ; 1800 Feet From The N Line and 1500 Feet From The W
Line of Section 9 Township 29N Range 10W , NMPM, San Juan County

III. 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 990, Farmington, NM 87401
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 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks. Unit F Sec. 9 Twp. 29N Rge. 10W 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.
Date Spudded 01-15-75 Date Compl. Ready to Prod. 06-30-75 Total Depth 2038' P.B.T.D. 2027'
Elevations (DF, RKB, RT, GR, etc.,) 5780' GL Name of Producing Formation Fruitland Top Oil/Gas Pay 1982 Tubing Depth Tubingless
Perforations 1982', 1983', 1984', 1993', 1994' Depth Casing Shoe 2038'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4 8 5/8" 112' GL 112 cu. ft.
6 3/4" 2 7/8" 2038' 334 cu. ft.
Tubingless

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-Bbls. Water-Bbls. Gas-MCF
RECEIVED JUL 11 1975 OIL CON. COM. DIST. 3

GAS WELL
Actual Prod. Test-MCF/D Length of Test 3 hours Bbls. Condensate/MMCF Gravity of Condensate
345
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
Calc. A.O.F. 741 3/4"

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.
A. G. Buico
(Signature)
Drilling Clerk
(Title)
July 10, 1975
(Date)

OIL CONSERVATION COMMISSION
JUL 15 1975
APPROVED
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. #3
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.
Separate Forms C-104 must be filed for each pool in multiple