				/
DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND			Porm C-104 Supersedes Old C-104 and C-11
U.S.G.S.  LAND OFFICE  OIL /	AUTHORIZATION TO TR	Effective 1-1-65		
OPERATOR / PROPATION OFFICE				
EL PASO NATU	RAL GAS CO.			
	MINGTON, NEW MEXICO			•
Reason(s) for filing (Check proper be New Well Recompletion Change in Ownership	Change in Transporter of:  Cil Dry C	Other (Please	explain)	
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND Lease Name	Vell No.; Pool Name, Including	Formation	Kind of Lease	Lease No.
BARRETT	3A BLANCO MV	State, Federal or Fe		1
	90 Feet From The <u>North</u> Li	ne and <u>1000</u>	Feet From The	West
Line of Section 20 To	ownship 31N Range	9W , NMPM,	San Juar	County
	RTER OF OIL AND NATURAL G			
Name of Authorized Transporter of O. EL PASO NATU	RAL GAS CO.	BOX 990, FARMI		py of this form is to be sent)  FXICO
Name of Authorized Transporter of Casinghead Gas or Dry Gas 🛣 Address (Give address to which approved copy of this form is to be sent)				
EL PASO NATURAL GAS CO.  BOX 990, FARMINGTON, NEW MEXICO  If well produces oil or liquids, Unit Sec. Twp. Pge. Is gas actually connected? When				
If this production is comminated w	D 20 31N 9W ith that from any other lease or pool.	give commingling order		
COMPLETION DATA  Designate Type of Completi	Oil Well Gas Well	New Vell Workover		Eack   Same Res'v.   Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	T.D.
11/30/77 Elevations (DF, RKB, RT, GR, etc.,	5/2/78	6004'		5977'
6490' GR	Name of Producing Formation  MV	5098'		ng Depth 5691'
5456-66,5481-90,5569-7	-51,5159-74,5174-89,5199- 9,5595-5616,5626-38,5650-	65,5717-21,5730-	35,5792-	h Casing Shoe
99,5810-22,5844-51,585 HOLE SIZE	CASING & TUBING SIZE	OXAKNINXNXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		SACKS CEMENT
13 3/4"	9 5/8''	223'		224 cf.
8 3/4'' 6 1/4''	7'' 4 1/2'' liner	3840'	2041	325 cf.
U 1/ T	4 1/2" liner 2 3/8"	3697-6 5691	JU4 '	400 cf.
TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be a		of load oil and mu	st be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow.	pump, gas lift, etc.	(RFI.FILM)
Length of Test	Tubing Pressure	Casing Pressure		MAY
Actual Prod. During Test	O11-8ble.	Water Bbls.	Gas	MAY 3 1 1978  OIL CON COM.
GAS WELL				DIST. 3
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grav	ity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 713	Casing Pressure (shut-i	n) Chok	• Sir•
CERTIFICATE OF COMPLIAN		NSERVATION	COMMISSION	

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.

(Signature)

(Title)

(Date)

Drilling Clerk

5/23/78

MAY 3.1 1978

By Original Signed by A. R. Kendrick SUPMED I am Laber & 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 multiply completed wells.