

|                        |     |   |
|------------------------|-----|---|
| NO. OF COPIES RECEIVED |     | 6 |
| DISTRIBUTION           |     |   |
| SANTA FE               |     | 1 |
| FILE                   |     | 1 |
| U.S.G.S.               |     |   |
| LAND OFFICE            |     |   |
| TRANSPORTER            | OIL | 1 |
|                        | GAS | 1 |
| OPERATOR               |     | 2 |
| 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<br><b>El Paso Natural Gas Company</b>    |   |
| Address<br><b>Box 990, Farmington, New Mexico</b> |   |
| Reason(s) for filing (Check proper box)           | Other (Please explain)  |
| New Well <input type="checkbox"/>                 | Change in Transporter of:   |
| Recompletion <input checked="" type="checkbox"/>  | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/>      | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

|   |                      |  |  |                               |
|---|----------------------|--|--|-------------------------------|
| Lease Name<br><b>Scott</b>  | Well No.<br><b>7</b> | Pool Name, Including Formation<br><b>Blanco Mesa Verde</b> | Kind of Lease<br>State, Federal or Fee | Lease No.<br><b>SR 078604</b> |
| Location<br>Unit Letter <b>B</b> ; <b>825</b> Feet From The <b>North</b> Line and <b>1700</b> Feet From The <b>East</b><br>Line of Section <b>3</b> Township <b>31N</b> Range <b>10W</b> , NMPM, <b>San Juan</b> County |                      |  |  |                               |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |                  |                    |                    |  |
|--|--|------------------|--------------------|--------------------|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent)<br><b>Box 990, Farmington, New Mexico</b> |                  |                    |                    |  |
| 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)<br><b>Box 990, Farmington, New Mexico</b> |                  |                    |                    |  |
| If well produces oil or liquids,<br>give location of tanks.  | Unit<br><b>B</b>   | Sec.<br><b>3</b> | Twp.<br><b>31N</b> | Rge.<br><b>10W</b> | Is gas actually connected? <input type="checkbox"/> 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'tv. | Diff. Res'tv. |
|   |  | <b>X</b>                                  |                                   | <b>X</b>      |        |           | <b>X</b>     |               |
| Date Spudded<br><b>W/O 5-23-67</b>                    | Date Compl. Ready to Prod.<br><b>6-28-67</b>     | Total Depth<br><b>5210</b>                | P.B.T.D.<br><b>5210</b>           |               |        |           |              |               |
| Elevations (DF, RKB, RT, GR, etc.)<br><b>5938' GL</b> | Name of Producing Formation<br><b>Mesa Verde</b> | Top <del>Gas</del> Gas Pay<br><b>4532</b> | Tubing Depth<br><b>5142'</b>      |               |        |           |              |               |
| Perforations<br><b>Open hole completion</b>           |  |   | Depth Casing Shoe<br><b>4532'</b> |               |        |           |              |               |
| TUBING, CASING, AND CEMENTING RECORD                  |  |   |                                   |               |        |           |              |               |
| HOLE SIZE   | CASING & TUBING SIZE                             | DEPTH SET                                 |                                   | SACKS CEMENT  |        |           |              |               |
| <b>13 3/4"</b>  | <b>9 5/8"</b>                                    | <b>174'</b>                               |                                   | <b>125</b>    |        |           |              |               |
| <b>8 3/4"</b>   | <b>7"</b>  | <b>4532'</b>                              |                                   | <b>500</b>    |        |           |              |               |
|   | <b>2 3/8"</b>                                    | <b>5142'</b>                              |                                   | <b>tubing</b> |        |           |              |               |

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  |

GAS WELL

|  |   |   |                           |
|--|---|---|---------------------------|
| Actual Prod. Test - MCF/D<br><b>5181 MCF/D</b>               | Length of Test<br><b>3 Hours</b>        | Bbls. Condensate/MMCF                   | Gravity of Condensate     |
| Testing Method (pitot, back pr.)<br><b>Calculated A.O.F.</b> | Tubing Pressure (shut-in)<br><b>845</b> | Casing Pressure (shut-in)<br><b>847</b> | Choke Size<br><b>3/4"</b> |

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.

Original signed by  
**Carl E. Matthews**

Petroleum Engineer

(Signature)

July 14, 1967

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

**JUL 19 1967**

, 19

Original Signed by **Emery C. Arnold**

TITLE **SUPERVISOR DIST. #4**

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.

WORKOVER

~~DATE LOG~~

- 5-23-67: Pulled tubing, set Bridge plug at 4468', tested 7" casing, pumped in 8 BPM at 1000#, Isolated holes 2169-2476', circulated from 2476'.
- 5-24-67 Ran casing inspection log to 3000'. Indicated bad casing, 1060-1100', 1500-2350', hole indicated at 2240' & 2320'. Casing held 1500#, above 2169', and below 2476'. Squeezed 7" annulus w/200 sacks cement, final squeeze pressure 800#, held 250#. B & R top of cement at 1413'.
- 5-25-67 Cleaned out open hole to 5210'. Ran 165 joints 2 3/8", 4.7# J-55 tubing, 5132' landed at 5142', w/cross pin collar and nipple on bottom.
- 6-28-67 Date well was tested.