NO. OF COPIES RECEIVED			(z
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		12	
PRORATION OF	ICE		

III.

NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL (COUSERVATION COMMISSION	Form C 104
SANTA FE		NEW MEXICO OIL CO'ISERVATION COMM. SSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-10	
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE IRANSPORTER OIL	-		
GAS	-		
PRORATION OFFICE	-		
Operator			
El Paso Natural Gas	Company		
Box 990, Farmington, Reason(s) for filing (Check proper box	New Mexico	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion:	Oil Dry Go	gs 🔲 Workover Detail	s on Back
Change in Ownership	Casinghead Gas Conde	ensate	
f change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND		ime, Including Formation	Kind of Lease
Fields		ico Mesa Verde	State, Federal or Fee
Location		AA TABBA ART ME	
Unit Letter N ; 11	40 Feet From The South Lin	ne and <u>1650</u> Feet From	The West
Line o: Section 25 , Tov	wnship 32N Range	11W , NMPM, San Ju	an County
Line o: Section 2) , Too	whship Sal Runge	TIM , INVIEW, Sail Ou	att County
	TER OF OIL AND NATURAL GA		and convertable form in to be conti-
Name of I uthorized Transporter of Cil		Address (Give address to which appr	
El Paso Natural Gas Name of Authorized Transporter of Car		Box 990, Farmington, Address (Give address to which appr	new mexico oved copy of this form is to be sent)
El Paso Natural Mas	Company	Box 990, Farmington,	New Mexico
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	hen
give locat on of tanks.	N 25 32N 11W		
f this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completic		! X	X
Date Spud-led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
W/0 7-15-65	W/O 7-21-65 Name of Producing Formation	5517 C.O. 5452 Top 932/Gas Pay Tubing Depth	
Blanco Mesa Verde	Mesa Verde	4930	5418
Perforations	PADG 194 GE	77,34	Depth Casing Shoe
4930-34, 4944-52, 49	80-88, 5000-04, 5 <u>39</u> 4-98,		5481
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	175!	175 Sks.
8 3/4"	4 1/2"	4810*	300 Sks.
6 1/4"	2 3/8"	5481 ' 5418 '	200 Sks.
TEST DATA AND REQUEST F	- ,		l and must be equal to or exceed top allou
OIL WELL	able for this d	lepth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
Longth of Toot	Tubing Pressure	Casing Pressure	Choke Sze PERA
Length of Test	raping Freezoute	Saoring (rosiomo	/gtl.riveD\
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas MCF
			SEP 3 1965
CAC WELL	,		DIL CON. COM.
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Corto Sire 3
7571 MCF/D	3 Hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Calculated A.O.F.	956	956	3/4"
CERTIFICATE OF COMPLIAN		OIL CONSERV	ATION COMMISSION
-			
	regulations of the Oil Conservation with and that the information given	11	
Commission have been compiled	and that the intermation given	ا المساعد بيات	more C. Arnold

VI.

above is true and complete to the best of my knowledge and belief. BY Original Signed Emery

OR G NAL SIGNED E.S. OBERLY

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(Date)

This form is to be filed in compliance with RULE 1104.

TITLE Supervisor Dist. # 3

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 Sections I, II, III, and VI only 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.

Date well was tested.

59-9-8