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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

Operator El Paso Natural Gas Company	
Address Box 990, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gelbke	Well No. 1	Pool Name, including Formation Blanco Pictured Cliffs Ext.	Kind of Lease State (Federal) or Fee	Lease No. SF079691
Location				
Unit Letter E	1460	Feet From The North	Line and 960	Feet From The West
Line of Section 11	Township 31 North	Range 11 West	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 990, Farmington, New Mexico 87401	
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 Company	Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 11
	Twp. 31 N	Rge. 11 W

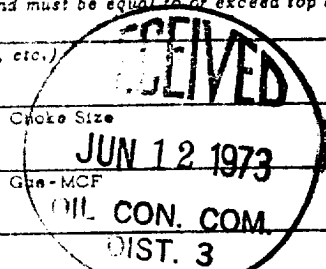
If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 11-8-72	Date Compl. Ready to Prod. 5-25-73	Total Depth 2770'	P.B.T.D. 2759'					
Elevations (DF, KKB, RT, GR, etc.) 5955' GL	Name of Producing Formation Pictured Cliffs	Top Gas Pay 2640'	Tubing Depth Tubingless					
Perforations 2640-2650, 2660-2670, 2692-2702'	Depth Casing Shoe 2770'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	128'	107 cu. ft.					
6 3/4"	2 7/8"	2770'	762 cu. ft.					
	Tubingless							

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead 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 1905	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.) Sol. ACF	Tubing Pressure (Shut-in) Tubingless	Casing Pressure (Shut-in) 930	Choke Size 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.

OIL CONSERVATION COMMISSION

JUN 12 1973

APPROVED _____, 19____

BY Original Signed by A. R. Kendrick

TITLE PETROLEUM ENGINEER DIST. NO. 3

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 portions of this form must be filled out completely for allowable on new wells completed in flow.

Fill out only Sections I, II, III, and VI for changes of owner, or other changes in well data or other such change of conditions.