

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

DISTRICT OFFICE		
SANTA FE	/	
FILE	/	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL /	
	GAS /	
OPERATOR	/	
PRORATION OFFICE		

Operator El Paso Natural Gas Company	
Address Box 990, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Allison Unit	Well No. 40	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter A ; 1000 Feet From The North Line and 990 Feet From The East				
Line of Section 19 Township 32N Range 6W , NMPM, San Juan 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)	
El Paso Natural Gas Company	Box 990, Farmington, New Mexico 87401	
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)	
Northwest Pipeline Corporation	501 Airport Drive, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 19
	Twp. 32N	Rge. 6W
	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	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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. J. Bures
(Signature)
Drilling Clerk
(Title)
March 4, 1974
(Date)

OIL CONSERVATION COMMISSION
MAR 5 1974

APPROVED _____, 19____
BY Original Signed by Emory G. 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 multiply completed wells.

**B. & R.
SERVICE, INC.**

TEMPERATURE SURVEY

COMPANY.....EL PASO NATURAL GAS CO.....
WELL.....40.....LEASE.....ALLISON UNIT.....
COUNTY.....SAN JUAN.....STATE.....NEW MEXICO.....
SEC.....NE19.....TWP.....32.....RGE.....6.....

APPROX. TOP CEMENT.....2700'.....

Survey Begins at 2000'.....Ft. Ends at 3500'.....Ft.
Approx. Fill-Up.....Max. Temp.....
Log Measured From KB.....Run No. 1.....

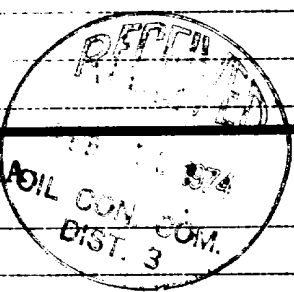
Casing Size	Casing Depth	Diam of Hole	Depth
4 1/2" from	to 8180'	7 7/8" from	to 8180'
from	to	from	to

Date of Cementing 12-3-73.....Time 2:00 PM.....
Date of Survey 12-3-73.....Time 2:00AM.....
Amount of Cement 446 Sks. 65/35 Poz.....

Recorded by WILSON.....Witnessed by.....

REMARKS OR OTHER DATA

D. V. TOOLS @ 5926' & 3532'



TEMPERATURE IN DEGREES FAHRENHEIT

