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SANTA FE			
FILE		1	
U.S.G.S.		<u></u>	, ,
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	\Box	
OPERATOR		1	
PRORATION OFFICE			

DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR	REQUEST FO	ONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL GAS		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
PRORATION OFFICE						
Operator	•			SIR .		
Northwest Pipeline Co. Address P.O. Box 90 Farmingt		Other (Please		3, 504		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Uther (Please	explain	S. S.		
New Well Recompletion	Oil Dry Gas			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Change in Ownership	Casinghead Gas Condens	ate				
If change of ownership give name and address of previous owner						
	PACE					
II. DESCRIPTION OF WELL AND L	Well No. Pool Name, Including For	rmation	Kind of Lease	Federal NM 03189		
Cox Canyon Unit	14 Blanco Pict	ured_Cliffs	State, Federal or Fee	, rederal Mil 03103		
Location K 145	O South Line	1740 †	Wes	st		
Unit Letter;;	Feet From The Line	and	Feet From The			
Line of Section 21 Town	nship 32N Range	11W , NMPM	San JUan	County		
Line of Section						
II. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address t	o which approved cop	y of this form is to be sent)		
Northwest Pipeline Co	rporation	Same as al				
Name of Authorized Transporter of Cas.		Address (Give address to which approved copy of this form is to be sent)				
Northwest Pipeline Co	rporation	Same as al				
If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connecte	ed? When			
give location of tanks.		No				
	h that from any other lease or pool, g	give commingling order				
V. COMPLETION DATA		New Well Workover	Deepen Plug	Back Same Res'v. Diff. Res'v.		
Designate Type of Completio		X	I DB	T.D.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth		3706'		
6-10-74 Elevations (DF, RKB, RT, GR, etc.)	7-11-74 Name of Producing Formation	3725 Top Cil/Gas Pay	Tubi	ng Depth		
6866 GL	Pictured Cliffs	3566' none				
Perforations	,		Dept	h Casing Shoe 3712*		
3566 - 3630	TUBING, CASING, AND	CENENTING PECOS		37.12		
HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEMENT		
12-3/4	8-5/8"	1.74		100 sacks		
6-1/2	2–7/8"	3712' 225 sacks		225 sacks		
	OR ATTOWARTE (Test must be all	ter recovery of total vol	ume of load oil and mu	ist be equal to or exceed top allow-		
V. TEST DATA AND REQUEST FO	able for this de	pth or be for full 24 hour	s)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas tijt, etc.	'		
	Tubing Pressure	Casing Pressure	Cho	ke Size		
Length of Test						
Actual Prod. During Test	Cil-Bbls.	Water-Bbis.	Gas	-MCF		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	CF Gra	vity of Condensate		
CV-1419 MCFD CAOF 1456	MCF/D 3 hours	-				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu		3/4 ¹¹		
one point potential	none	873 psia	CONSERVATIO	N. COMMISSION		
VI. CERTIFICATE OF COMPLIAN	CE		COMPERANTIO	SEP 9 - 1974		
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.		11	APPROVED			
			Original Signed by A. R. Kendrick			
			TITLE PETROLEUM ENGINEER DIST. NO. 8			
		11	This form is to be filed in compliance with RULE 1104.			
		11		for a newly drilled or deepened		
/Sie	nature)	If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
Drilling & Production Engineer		All sections of this form must be filled out completely for allow-				
(T	itle)	Il abia on new and:	recompleted Wells.			
September 5, 1974		Fill out only well name or numb	Set, of framaporter of	, and VI for changes of owner, rother such change of condition.		
(E	Pate)	1	C-104 4-	steed for each nool in multiply		