or we have	~	15		ı
DISTRIBUTION			 	١
ANTA FE		17		_ ا
FILE		1		
J.S.G.S.		 		
LAND OFFICE		1		
TRANSPORTER	OIL	T		
	GAS	1		
OPERATOR		1		
PRORATION OFF				

NEW MEXICO OIL CONSERVATION COMMISSIO

	ILE /	REQUE	ST FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-1
	J.S.G.S.	AUTHORIZATION TO	AND	Effective 1-1-65
	LAND OFFICE	AUTHORIZATION TO T	TRANSPORT OIL AND NATURA	L GAS
	TRANSPORTER OIL /			
	GAS /			
	OPERATOR 1			
Y.	PRORATION OFFICE			
	El Paso Natural Gas	Сотрану		
	P. O. Box 990, Farmi	ington, NM 87401		
	Reason(s) for filing (Check proper	boxj	Other (Please explain)	
	New Well Recompletion	Change in Transporter of:		
	Change in Ownership		Gas	
	If change of ownership give name	3	densate	
11.	and address of previous owner			
	Lease Name	Well No. Pool Name, Including	Formation Kind of Le	use Lease No.
Brookhaven Com H 10 Blanco PC		10 Blanco PC Ex	t (State) Fede	
		475 N	17.40	
	Onit Letter X	475 Feet From The N:	ine and 1140 Feet From	n The E
	Line of Section 16	Fownship 31N Range	11W , NMPM, Sar	1 Juan County
**	DECICULARION OF THE ANGEL			County County
AE.	Name of Authorized Transporter of C	RTER OF OIL AND NATURAL O	GAS	
	El Paso Natural Gas		P. O. Box 990, Farmin	roved copy of this form is to be sent)
	Name of Authorized Transporter of C	Casinghead Gas or Dry Gas X	Address (Give address to which appr	gton, NM 87401 roved copy of this form is to be sent)
	El Paso Natural Gas (Company	P. O. Box 990, Farmin	gton, NM 87401
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? W	Then
ı	give location of tanks,	A 16 31N 111	<u></u>	
V.	If this production is commingled v COMPLETION DATA	with that from any other lease or pool	l, give commingling order number:	
		OII Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Complet	! A	X	i ame tes v. Bill. Res.v.
	Date Spudded 03-06-75	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
ł	Elevations (DF, RKB, RT, GR, etc.)	08-11-75 Name of Producing Formation	2868'	2858'
	6026' GL	Pictured Cliffs	Top X11/Gas Pay 2720	Tubing Depth
Ī	Perforations		2720	Tubingless Depth Casing Shoe
-	2720', 2732', 2736',	2737', 2768', 2769'		2868'
-			ID CEMENTING RECORD	
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
ŀ	7 7/8" and 6 3/4"	2 7/8"	135 ' 2868 '	118 cu. ft.
		Tubingless	2808	805 cu. ft.
7.]	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be d	after recovery of total volume of load oil	and must be equal to or exceed top allow-
-	DIL WELL Date First New Oil Run To Tanks	able for this d	epth or be jor juit 24 hours	
	a and the state of	Date of 1982	Producing Method (Flow, pump, gas li	ift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Ch 2 2
				Ch 200
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gal Port 10 S. W
L				1 3 8 8 7
c	GAS WELL		,	1 2 3 3
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	1315	3 hours		Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
L	Calc. A.O.F.		862	3/4"
. C	ERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION 1 197,5
	hands a side of a side of		11	
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.		By Original Signed by A. R. Kendrick		
	· ii la L.			
	D. G. Brica)	This form is to be filed in c	able for a newly drilled or deepened
	(Signo	ature)	well, this form must be accompar	aied by a tabulation of the deviation
	Drilling Clerk	Jah	tests taken on the well in accordance All sections of this form mus	dance with RULE 111. It be filled out completely for allow-
	August 14, 1975	·e/	able on new and recompleted we	110.
(Date)		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.		
		I I	.,	

Senerate Forms C-104 must be filed for each nool in multiplu