

DISTRIBUTION		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104  
Effective 1-1-65

Operator El Paso Natural Gas Company	
Address P. O. Box 990, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input 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 Pinon Mesa A	Well No. 2	Pool Name, including Formation Basin Dakota	Kind of Lease State (Federal) or Fee	Lease No. Ute Mtn Tribal MOO-C-1420-0626
Location Unit Letter L ; 1750 Feet From The S Line and 1150 Feet From The @				
Line of Section 36 Township 31N Range 14W , 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	P. O. Box 990, Farmington, NM 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)			
El Paso Natural Gas Company	P. O. Box 990, Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 36	Twp. 31N	Rge. 14W
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'tv.	Diff. Res'tv.
			X	X					
Date Spudded 04-26-76	Date Compl. Ready to Prod. 06-23-76	Total Depth 6403'		P.B.T.D. 6388'					
Elevations (DF, RKB, RT, GR, etc.) 5711' GL	Name of Producing Formation Dakota	Top X/Gas Pay 6142		Tubing Depth 6220'					
Perforations 6142', 6165', 6172', 6180', 6188', 6212', 6234'				Depth Casing Shoe 6403'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		229'		177 cu. ft.				
7 7/8"	4 1/2"		6403'		1400 cu. ft.				
	2 3/8"		6220'		Tbg				

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) 1749	Casing Pressure (Shut-in) 1960	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. Buces*  
(Signature)

Drilling Clerk

(Title)

July 9, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by A. E. Kendrick

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 multiple