

DISTRIBUTION	
SANTA FE	1
LE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	1
PRORATION OFFICE	

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-
Effective 1-1-65

I. Operator
EL PASO NATURAL GAS CO.
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 ☐
Other (Please explain)
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name FIELDS COM	Well No. 5A	Pool Name, Including Formation BLANCO MESA VERDE	Kind of Lease State, Federal, or Fee	Lease No. NM 010989
Location Unit Letter F : 1765 Feet From The North Line and 1500 Feet From The West Line of Section 28 Township 32-N Range 11-W, 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"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) BOX 990, FARMINGTON, NEW MEXICO	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) BOX 990, FARMINGTON, NEW MEXICO	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 28
	Twp. 32N	Rge. 11W

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 7/29/77	Date Compl. Ready to Prod. 12/19/77	Total Depth 5724'	P.B.T.D. 5706'					
Elevations (LF, RKB, RT, GR, etc.) 6340' GR	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4573'	Tubing Depth 5625'					
Perforations 22,4922-40,4941-58,5039-63,5103-09,5158-70,5307-22,5322-37,5356-62,5372-80,5404-14,5425-38,5451-58,5458-72,5503-09,5550-56,5583-93,5605-17,5629-37,5647-54	Depth Casing Shoe 5724'							
HOLE SIZE 13 3/4" 8 3/4" 6 1/4"	CASING & TUBING SIZE 9 5/8" 7" 4 1/2" liner 2 3/8"		DEPTH SET 236' 3429' 3261-5724' 5625'		SACKS CEMENT 224 cf. 515 cf. 425 cf. tubing			

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 (pilot, back pr.)	Tubing Pressure (shut-in) 676	Casing Pressure (shut-in) 664	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.

N. G. Dwyer
(Signature)
Drilling Clerk
(Title)
1/25/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original Signed by A. R. 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.

Supersedes Form C-104 must be filed for each well in multiple