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	GAS	1
OPERATOR		
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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-1
Effective 1-1-65

I. Operator
EL PASO NATURAL GAS CO.
Address
BOX 990, FARMINGTON, NEW MEXICO
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Casinghead Gas ☐ Other (Please explain):
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name LUCERNE A	Well No. 2A	Pool Name, including Formation BLANCO MESA VERDE	Kind of Lease State, Federal or Fee	Lease No. SF 078389
Location Unit Letter P ; 800 Feet From The South Line and 1180 Feet From The East Line of Section 9 Township 31-N Range 10-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"/>	Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO.	BOX 990, FARMINGTON, NEW MEXICO
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 CO.	BOX 990, FARMINGTON, NEW MEXICO
If well produces oil or liquids, give location of tanks.	Unit P Sec. 9 Twp. 31N Rge. 10W 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.
		X	X					
Date Spudded 12/16/77	Date Compl. Ready to Prod. 3/1/78	Total Depth 5663'	P.B.T.D. 5649'					
Elevations (DF, RKB, RT, GR, etc.) 6173' GR	Name of Producing Formation MV	Top Gas Pay 4478'	Tubing Depth 5616'					
Perforations 4478-88, 4501-07, 4618-29, 4706-28, 4740-47, 4762-70, 4784-89, 4799-4806, 4816-38, 4868-76, 4912-30, 5008-16, 5071-78, 5088-5100, 5124-34, 5154-83, 5202-18, 5228-40, 5240-52, 5261-76, 5286-96, 5306-18, 5331-38, 5372-96, 5425-34, 5452-70, 5480-88, 5514-24, 5564-72, 5607-14'								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
13 3/4"		9 5/8"		280'		1075 cf.		
8 3/4"		7"		3327'		434 cf.		
6 1/4"		4 1/2" liner		3170-5663'		431 cf.		
		2 3/8"		5616'		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 5499	Length of Test 3 hours	Bbls. Condensate/MCF - 3 hours 5.04	Gravity of Condensate 44.4 API
Testing Method (pilot, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 600	Casing Pressure (Shut-in)	Choke Size 3/4" variable

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.

[Signature]
(Signature)

Drilling Clerk

4/18/78

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____

BY Original Signed by A. R. Kendrick 19

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 or condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.