

CMD :
OG5SECT

ONGARD
INQUIRE LAND BY SECTION

05/22/00 16:30:43
OGOMES -TPHC
PAGE NO: 1

Sec : 25 Twp : 29N Rng : 06W Section Type : NORMAL

D 40.00 Federal owned U A	C 40.00 Federal owned U	B 40.00 Federal owned U A	1 18.45 Federal owned U
E 40.00 Federal owned U	F 40.00 Federal owned U A	G 40.00 Federal owned U A	2 18.46 Federal owned U

PF01 HELP
PF07 BKWD

PF02
PF08 FWD

PF03 EXIT
PF09 PRINT

PF04 GoTo
PF10 SDIV

PF05
PF11

PF06
PF12

58.45
58.46

116.91

CMD :
OG5SECTONGARD
INQUIRE LAND BY SECTION05/22/00 16:30:47
OGOMES -TPHC
PAGE NO: 2

Sec : 25 Twp : 29N Rng : 06W Section Type : NORMAL

L 40.00	K 40.00	J 40.00	3 18.48
Federal owned U A A	Federal owned U	Federal owned U A	Federal owned U
M 40.00	N 40.00	O 40.00	4 18.49
Federal owned U	Federal owned U	Federal owned U	Federal owned U

PF01 HELP
PF07 BKWDPF02
PF08 FWDPF03 EXIT
PF09 PRINTPF04 GoTo
PF10 SDIVPF05
PF11PF06
PF12

¹
58.48
¹
58.49
¹
116.97
116.91
233.88

320 = .73.0879
1

CMD : ONGARD 05/22/00 16:31:06
OG6IWCM INQUIRE WELL COMPLETIONS OGOMES -TPHC

API Well No : 30 39 20357 Eff Date : 01-01-1900 WC Status : A
Pool Idn : 71599 BASIN DAKOTA (PRORATED GAS)
OGRID Idn : 17654 PHILLIPS PETROLEUM CO NW
Prop Idn : 9257 SAN JUAN 29 6 UNIT

Well No : 082
GL Elevation: 6645

	U/L	Sec	Township	Range	North/South	East/West	Prop/Act (P/A)
	---	---	-----	-----	-----	-----	-----
B.H. Locn	: B	25	29N	06W	FTG 1090 F N	FTG 1138 F E	P

Lot Identifier:
Dedicated Acre: 233.60
Lease Type : F
Type of consolidation (Comm, Unit, Forced Pooling - C/U/F/O) :

M0025: Enter PF keys to scroll

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06
PF07	PF08	PF09	PF10 NEXT-WC	PF11 HISTORY	PF12 NXTREC

CMD : ONGARD 05/22/00 16:31:11
 OG6ACRE C102-DEDICATE ACREAGE OGOMES -TPHC
 Page No : 1

API Well No : 30 39 20357 Eff Date : 04-30-1991
 Pool Idn : 71599 BASIN DAKOTA (PRORATED GAS)
 Prop Idn : 9257 SAN JUAN 29 6 UNIT Well No : 082
 Spacing Unit : 30983 OCD Order : Simultaneous Dedication:
 Sect/Twp/Rng : Acreage : 233.60 Revised C102? (Y/N) :
 Dedicated Land:

S	Base	U/L	Sec	Twp	Rng	Acreage	L/W	Ownership	Lot	Idn
	B		25	29N	06W	40.00	N	FD		
	G		25	29N	06W	40.00	N	FD		
	J		25	29N	06W	40.00	N	FD		
	O		25	29N	06W	40.00	N	FD		
A	1		25	29N	06W	18.45	N	FD		
H	2		25	29N	06W	18.46	N	FD		
I	3		25	29N	06W	18.48	N	FD		
P	4		25	29N	06W	18.49	N	FD		

E0005: Enter data to modify or PF keys to scroll

PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05 PF06 CONFIRM
 PF07 BKWD PF08 FWD PF09 PF10 LAND PF11 NXTSEC PF12 RECONF

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION

REVISED

Form C-104

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address PHILLIPS PETROLEUM COMPANY 5525 Hwy. 64, NBU 3004 FARMINGTON, NM 87401		OGRID Number 017654
		Reason for Filing Code CO, CG
API Number 30 - 039-20357	Pool Name Basin Dakota	Pool Code 71599
Property Code 009257	Property Name San Juan 29-6 Unit	Well Number 82

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
B	25	29N	6W		1090	North	1138	East	Rio Arriba

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
025244	Williams Field Services P.O. Box 58900 Salt Lake City, UT 84158-0900	2100730		

IV. Produced Water

POD	POD ULSTR Location and Description
2100750	

V. Well Completion Data

Spud Date	Ready Date	TD	PSTD	Perforations

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Thp. Pressure	Cog. Pressure
Choke Size	Oil	Water	Gas	AOFP

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Ed Hasely</i>		OIL CONSERVATION DIVISION Approved by: <i>37.8</i> SUPERVISOR DISTRICT #3	
Printed name: Ed Hasely		Title:	
Title: Environmental/Regulatory Engineer		Approval Date: MAR 21 1994	
Date: 3-15-94	Phone: 599-3460		

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

DISTRICT II
P.O. Drawer DD, Arredondo, NM 88210

DISTRICT III
1000 Rio Grande Rd., Aztec, NM 87410

91 APR 22 PM 1 31

Operator PHILLIPS PETROLEUM COMPANY		Well APN No.
Address 300 W ARRINGTON, SUITE 200, FARMINGTON, NM 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Catalyzed Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator Northwest Pipeline Corp., 3535 E. 30th, Farmington, NM 87401		

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-6 Unit	Well No. 82	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 1090 Feet From The North Line and 1,138 Feet From The East Line Section 25 Township 29N Range 6W , NMPM , Rio Arriba 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"/> Gary Energy	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Bloomfield, NM 87413	
Name of Authorized Transporter of Catalyzed Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 58900, SLC, UT 84158-0900	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Top.	Rgn.
		Is gas actually connected?
		When? Attn: Claire Potter

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 Ref'd	Diff Ref'd
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

RECEIVED
APR 01 1991

OIL CON. DIV

GAS WELL	
Actual Prod. Test - MCF/D	Length of Test
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)
	Casing Pressure (Shut-in)
	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature L. E. Robinson Sr. Drlg. & Prod. Engr.
Printed Name L. E. Robinson Title
Date Apr. 1, 1991 Telephone No. (505) 599-3412

OIL CONSERVATION DIVISION

Date Approved APR 01 1991

By [Signature]
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Section I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-10 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		3
DISTRIBUTION		
SANITARY		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
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 and C-111
Effective 1-1-65

Operator Northwest Pipeline Corporation		
Address 501 Airport Drive, Farmington, New Mexico 87401		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>		

If change of ownership give name and address of previous owner El Paso Natural Gas Company, PO Box 990, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-6 Unit	Well No. 82	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. NM 012671
Location Unit Letter <u>B</u> ; <u>1090</u> Feet From The <u>North</u> Line and <u>1138</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>29N</u> Range <u>6W</u> , NMPM, Rio Arriba 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"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 25	Twp. 29N	Rge. 6W	Is gas actually connected? <input type="checkbox"/>	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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 depth.)

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)	Casing Pressure (shut-in)	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.


(Signature)

OFFICIAL USE

JAN 9 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

PETROLEUM ENGINEER DIST. NO. 3

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 multiply completed wells.

OIL CONSERVATION COMMISSION

BOX 697

120 EAST CHACO

AZTEC, NEW MEXICO

71 JUN 24 AM 8 27

NOTICE OF GAS CONNECTION



DATE June 23, 1971

THIS IS TO NOTIFY THE OIL CONSERVATION COMMISSION THAT CONNECTION FOR THE PURCHASE OF GAS FROM

THE El Paso Natural Gas Company
OPERATOR

San Juan 29-6 Unit #82 B 25-29-6
LEASE WELL UNIT S-T-R

Basin Dakota El Paso Natural Gas Company
POOL NAME OF PURCHASER

WAS MADE ON June 16, 1971 , FIRST DELIVERY June 17, 1971
DATE DATE

Choke 6,281
AOF 6,665
INITIAL POTENTIAL

El Paso Natural Gas Company
PURCHASER

Original Signed by W. M. Rogers
REPRESENTATIVE

Chief Dispatcher
TITLE

CC: TO OPERATOR
OIL CONSERVATION COMMISSION - SANTA FE
F. N. WOODRUFF - EL PASO
BY ~~XXXXXX~~
FILE

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	2
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

APR 30 1971

CIL CONSERVATION

I. Operator
El Paso Natural Gas Company
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

CHANGE
OK

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-6 Unit	Well No. 82	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee <input checked="" type="checkbox"/>	Lease No. NM 012671
Location Unit Letter <u>B</u> ; 1090 Feet From The <u>North</u> Line and 1138 Feet From The <u>East</u> Line of Section 25 Township 29N Range 6W, NMPM, Rio Arriba 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 Company	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico 87401				
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 29N	Rge. 6W	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 <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 3-14-71	Date Compl. Ready to Prod. 4-6-71		Total Depth 8048'		P.B.T.D. 8042'			
Elevations (DF, RKB, RT, GR, etc.) 6645' GL	Name of Producing Formation Dakota		Top XXXX Gas Pay 7896'		Tubing Depth 8028'			
Perforations 7896-7914, 7958-70', 7996-8002', 8032-38'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		214'		190 Sks.			
8 3/4"	7"		3832'		190 Sks.			
6 1/4"	4 1/2"		8048'		330 Sks.			
	1 1/2"		8028'		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 6665 MCF/D	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calculated A. OF. XX	Tubing Pressure (shut-in) 2262	Casing Pressure (shut-in) XX68XX 2689	Choke Size 3/4"

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.

FH Wood
(Signature)

Petroleum Engineer

(Title)

April 21, 1971

(Date)

OIL CONSERVATION COMMISSION

APR 23 1971

APPROVED

BY

TITLE

SUPERVISOR DIST. #3

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 multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYRECEIVED
APR 23 1971
(See other side for location on reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other <input type="checkbox"/>
2. NAME OF OPERATOR El Paso Natural Gas Company							
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1090°N, 1138°E At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 3-14-71				16. DATE T.D. REACHED 3-24-71		17. DATE COMPL. (Ready to prod.) 4-5-71	
18. ELEVATIONS (DF, REB, ET, GR, ETC.)* 6645' GL		19. ELEV. CASINGHEAD					
20. TOTAL DEPTH, MD & TVD 8048'		21. PLUG, BACK T.D., MD & TVD 8042'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-8048'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7896 - 8038 (Dakota)						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN 1-EL, Density						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD			
9 5/8"	32.3#	214'	13 3/4"	190 Sks.			
7"	23#	3832'	8 3/4"	190 Sks.			
4 1/2"	10.5 & 11.5#	8048'	6 1/4"	330 Sks.			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/2"	8028	
31. PERFORATION RECORD (Interval, size and number) 7896-7914, 7958-70', 7996-8002', 8032-38' w/18 SPZ				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				7896-8038		50,000# sand, 51,000 gal. water	
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 4-5-71	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. SI 2262	CASING PRESSURE SI 2689	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF. 6665 MCF/D - A.O.F.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY B. J. Broughton	
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Original Signer F. H. WOOD				TITLE Petroleum Engineer		DATE 4-21-71	

*(See Instructions and Spaces for Additional Data on Reverse Side)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

NM 012671

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME San Juan 29-6 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company	8. FARM OR LEASE NAME San Juan 29-6 Unit
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico 87401	9. WELL NO. 82
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1090'N, 1138'E	10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T-29-N, R-6-W N. M. P. M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6645' GL	12. COUNTY OR PARISH Rio Arriba
	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

3-14-71 Spudded well, drilled surface hole.

3-15-71 Ran 6 joints 9 5/8", 32.30#, K-55 surface casing (201') set at 214' w/190 sacks of cement circulated to surface. W.O.C. 12 hours. Held 600#/30 Min.

3-19-71 T.D. 3832'. Ran 117 joints 7", 23#, KS-55 intermediate casing (3819') set at 3832' w/190 sacks of cement, W.O.C. 14 hours, held 800#/30 Min.

3-26-71 T.D. 8048'. Ran 247 joints 4 1/2", 11.5 and 10.5# N-80 and J-55 production ceg. (8035') set at 8048' w/330 sacks of cement. W.O.C. 18 hours.

3-27-71 P.B.T.D. 8042'. Perf. 7896-7914', 7958-70', 7996-8002', 8032-38' w/18 SPZ. Frac w/50,000# 40/60 sand, 51,000 gal. water, dropped 3 sets of 18 balls, flushed w/5100 gal. water.



18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Petroleum Engineer

DATE

3-30-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG-BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒

OTHER

SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 990 - Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

1090' N, 1138' E

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

6645' GL

16. NO. OF ACRES IN LEASE

19. PROPOSED DEPTH

3050'

17. NO. OF ACRES ASSIGNED
TO THIS WELL

231.00

20. ROTARY OR CABLE TOOLS

Rotary

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
13 3/4"	9 5/8"	32.3	200'	190 sacks to circulate
8 3/4"	7"	20	3030'	190 sacks to cover 8 1/2 Alamo
6 1/4"	4 1/2"	10.5 & 11.6	3050'	330 sacks to fill to 3030'

Selectively perforate and sand water fracture the Dakota formation.

The 3/2 of Section 25 is dedicated to this well.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Original Signed F. H. WOOD

SIGNED

TITLE

Petroleum Engineer

DATE

2-19-71

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

new NWU Unit Agreement

*See Instructions On Reverse Side

30-039-20357

5. LEASE DESIGNATION AND SERIAL NO.

M 012671

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 29-6

8. FARM OR LEASE NAME

San Juan 29-6 Unit

9. WELL NO.

42

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK.

AND SURVEY OR 40C
Sec. 25, T-29-N, R-6-W
N.M.P.M.

12. COUNTY OR PARISH

13. STATE

Rio Arriba

New Mexico

CHANGE
OK

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

APR 8 55

EL PASO NATURAL GAS COMPANY

SAN JUAN 29-6 UNIT

(NM-012671)

82

B

25

29-N

6-W

RIO ARRIETA

1090

NORTH

1138

EAST

6645

DAKOTA

BASIN DAKOTA

233.88

- Outline the acreage dedicated to the subject well by colored pencil or ballpoint marks on this plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof as to working interest and royalty.
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, forced-pooling, etc.?

Yes

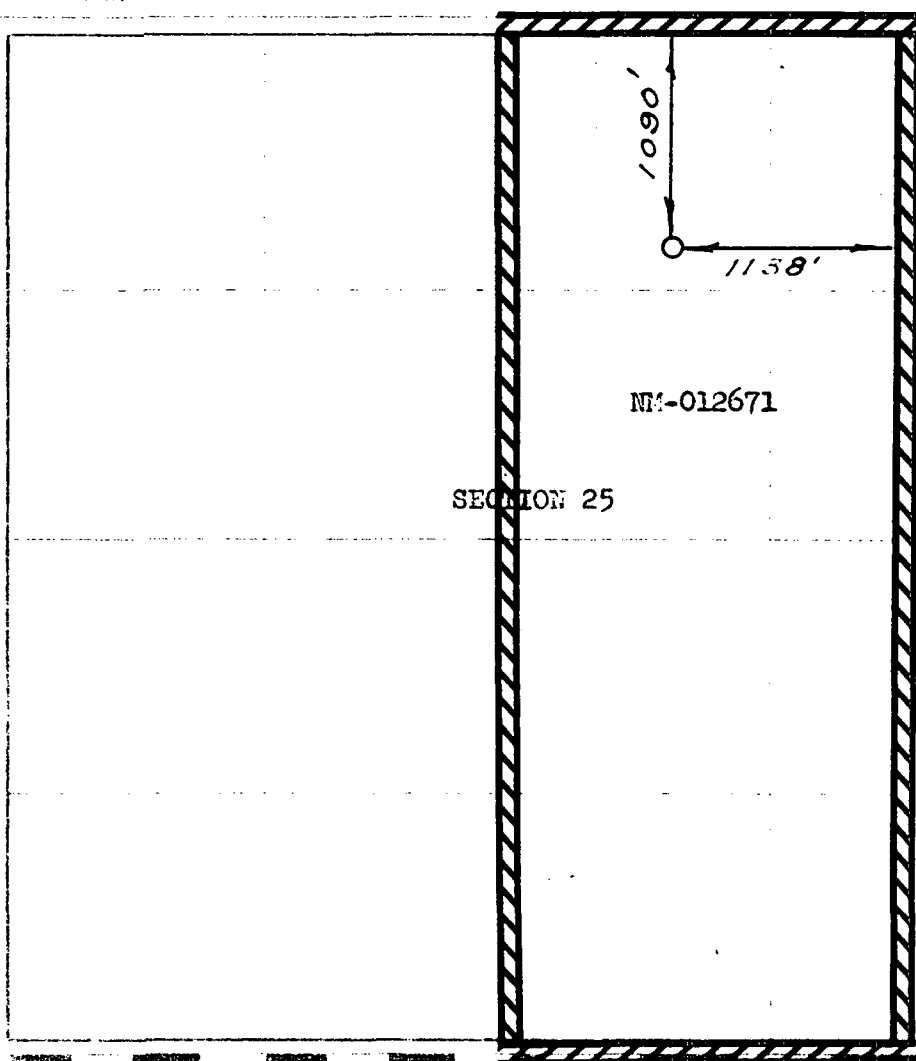
No

If answer is "yes," type of consolidation

Unitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. If so, reverse side of this form if necessary.

No allowable well be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit eliminating such interests has been approved by the Commission.



WELL LOCATION

I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

Original Signed F. H. WOOD

Petroleum Engineer

El Paso Natural Gas Company

February 19, 1971



JANUARY 11, 1971

Paul H. Wood