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	SANTA FE /		CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-11	
	FILE	FILE AND Effective 1-1-65			
U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			GAS		
LAND OFFICE					
	TRANSPORTER GAS /				
	OPERATOR 2				
1.	PRORATION OFFICE	1			
	Operator				
	El Paso Natural Gas Company Address				
	,	Sox 990, Farmington, New Mexico - 87401			
	Reason(s) for filing (Check proper box	lew Mexico - 8(401	Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Ga	ıs 🔲		
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name				
	and address of previous owner				
II.	DESCRIPTION OF WELL AND	LEASE			
	Lease Name	Well No. Pool Name, Including F		UTCALLITA.	
	Jicarilla 92	4 Tapacito Pictu	red Cliffs State, Feder	al or Fee Abache Cont #92	
	Location				
	Unit Letter K ; 17	750 Feet From The South Lin	e and 1750 Feet From	The West	
	Line of Section 31 To	wnship 27N Range	3W , NMPM, Rio A	rriba County	
	Line of Section 2 31 100	whomp ZIM Mange	JW , MAINH, RIO A	rriba County	
III.		TER OF OIL AND NATURAL GA			
	Name of Authorized Transporter of Oil		Address (Give address to which appro	•	
	El Paso Natural Gas Company Name of Authorized Transporter of Casinghead Gas or Dry Gas X		Box 990, Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent)		
	El Paso Natural Gas Co		Box 990, Farmington,		
		Unit Sec. Twp. Rge.		nen Mexico	
	If well produces oil or liquids, give location of tanks.	K 31 27N 3W			
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:	The state of the s	
IV.	COMPLETION DATA				
	Designate Type of Completic	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	5-27-67	8-9-67	4072'	4061'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oct / Gas Pay	Tubing Depth	
	7145' GL	Pictured Cliffs	3924'	Tubingless Completion	
	Perforations	_		Depth Casing Shoe	
	#92年末年の大学の第2年 3924-48, 3990-4002 TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACVE CEMENT	
	12 1/4"	8 5/8"	121'	SACKS CEMENT	
	6 1/4"	2 7/8"	4072	125 Sks. 130 Sks.	
V.		OR ALLOWABLE (Test must be as	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l.	ift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
				LALLIN INFA	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas-MCF	
				W AUG 23 1967	
	GAS WELL			OIL CON. COM	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grayity of Condengate	
	2098	3 Hours	-		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Calculated A.O.F.		1083	3/4"	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			APPROVED AUG 23 1967		
	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		BY (fally (flowed		
			TITLE SUPERVISOR DIST. #8		
	(d) 20 Och -				
	(Mil El Hall house		This form is to be filed in compliance with RULE 1104.		
((Signature)		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		
	Petroleum Engineer		tests taken on the well in acco	rdance with RULE 111.	
	· (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
	August 22, 1967		Fill out only Sections I, II, III, and VI for changes of owner,		
	/Da	to i	Well name or number, or franknor	ten of other such change of condition.	

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