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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-110
Effective 1-1-65

| | |
|---|---|
| Operator El Paso Natural Gas Company | |
| Address PO Box 990, Farmington, New Mexico | |
| 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

| | | | | | |
|----------------------------------|----|----------------|--|--|------------------------|
| Lease Name San Juan 27-4 Unit | | Well No. 58 | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee | Lease No. SH 080670 |
| Location | | | | | |
| Unit Letter | M | 790 | Feet From The | South | Line and |
| | | | | | 1190 |
| | | | | | Feet From The |
| | | | | | West |
| Line of Section | 31 | Township | 27-N | Range | 4-W |
| | | | | | NMPM, Rjo Arriba |
| | | | | | County |

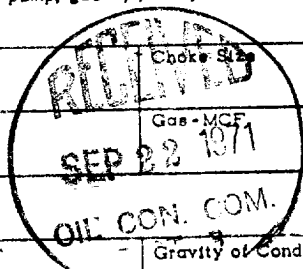
| | | | |
|--|-----------|--|-------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | | Address (Give address to which approved copy of this form is to be sent) | |
| El Paso Natural Gas Company | | PO Box 990, Farmington, NM | |
| 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 | | PO Box 990, Farmington, NM | |
| If well produces oil or liquids, give location of tanks. | Unit M | Sec. 31 | Twp. 27N |
| | | | Rge. 4W |
| | | Is gas actually connected? When | |

If this production is commingled with that from any other lease or pool, give commingling order number:

| | | | | | | | | | |
|--|---------------------------------------|----------------------------|----------|-----------------------|----------|--------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | | | X | X | | | | | |
| Date Spud 8-11-71 | Date Compl. Ready to Prod. 9-2-71 | Total Depth 8536' | | P.B.T.D. 8520' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 7306'GL | Name of Producing Formation Dakota | Top Oil/Gas Pay 8266' | | Tubing Depth 8467' | | | | | |
| Perforations 8266-72', 8282-88', 8370-78', 8394-8402', 8468-72' | | Depth Casing Shoe 8536' | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 13 3/4" | | 9 5/8" | | 232' | | 190 sks. | | | |
| 8 3/4" | | 7" | | 4351' | | 120 sks. | | | |
| 6 1/4" | | 4 1/2" | | 8536' | | 360 sks. | | | |
| | | 1 1/2" | | 8467' | | 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 |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. |



| | | | | | |
|---|-----------------------------------|-----------------------------------|--|-----------------------|--|
| GAS WELL | | Bbls. Condensate/MMCF | | Gravity of Condensate | |
| Actual Prod. Test-MCF/D 4259 | Length of Test 3 hours | Casing Pressure (Shut-in) 2372 | | Choke Size 3/4" | |
| Testing Method (pilot, back pr.) Calc. AOF | Tubing Pressure (Shut-in) 2376 | | | | |

| | | | |
|--|--|--|--|
| VI. CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION SEP 22 1971 | |
| 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. | | APPROVED _____, 19 | |
| BY _____ | | Original Signed by Emery C. Arnold | |
| 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. | | | |

EH Wood
(Signature)
Petroleum Engineer
(Title)
September 20, 1971
(Date)