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| FILE              | 1   | L |  |
| U.S.G.S.          |     |   |  |
| LAND OFFICE       |     |   |  |
| IRANSPORTER       | OIL |   |  |
| , HARTON EN       | GAS | 1 |  |
| OPERATOR          | 3   |   |  |
| PROBATION OF      | 1   |   |  |

## NEW MEXICO OIL CONSERVATION COMMISSION

|   | SANTA FE   | -/-  |        | REQUEST  | FOR ALLOWABLE   |                              | Supersedes Old (<br>Elfective 1-1-65 | C-104 and C-110 |  |
|---|--|--|--------|--|---|------------------------------|--------------------------------------|-----------------|--|
|   | FILE<br>U.S.G.S.   |  | L      |  | AND   |                              | Filective 1-1-92                     |                 |  |
|   | LAND OFFICE  |  |        | AUTHORIZATION TO TRA   | TO TRANSPORT OIL AND NATURAL GAS  |                              |                                      |                 |  |
|   | OIL  | OIL //   |        |  |   |                              |                                      |                 |  |
|   | TRANSPORTER GAS  | 1  |        |  |   |                              |                                      |                 |  |
|   | OPERATOR   | 0  |        |  |   |                              |                                      |                 |  |
| 1.  | PRORATION OFFICE   |  |        |  |   |                              |                                      |                 |  |
|   | Operator   |  |        |  |   |                              |                                      |                 |  |
|   | El Paso Natural  | L Gé   | IS_V   | Company  |   |                              | V                                    |                 |  |
|   | Box 990. Farmin  | ieto   | on . l | New Mexico   |   |                              |                                      |                 |  |
|   | Box 990, Farmington, New Mexico  Reason(s) for filing (Check proper box)  Other (Please explain) |  |        |  |   |                              |                                      |                 |  |
|   | New Well XX  |  |        |  |   |                              |                                      |                 |  |
|   | Recompletion Change in Ownership   |  |        | Oil Dry Gar Casinghead Gas Conden  |   |                              |                                      |                 |  |
|   | Citange in Ownership[]   |  |        | Casingheat Gas   |   |                              |                                      |                 |  |
|   | If change of ownership give<br>and address of previous own                                       |  | e      |  |   |                              |                                      |                 |  |
|   | and address of previous own  |  |        |  |   |                              |                                      |                 |  |
| Ħ.  | DESCRIPTION OF WELL  | L AN   | ID I   | Well No.: Pool Name, Including Fo  | ormation  | Kind of Lease                |                                      | Lease No.       |  |
|   | Lease Name<br>San Juan 27-5 Ur   | nit  |        | 122 Basin Dakota   |   | State, Federal or Fe         | SF                                   |                 |  |
|   | Location -   |  |        |  |   | <u> </u>                     |                                      |                 |  |
|   | Unit Letter A  | . {  | 800    | Feet From The North Lin  | 900   | Feet From The                | East                                 |                 |  |
|   |  | -  |        | 07.37  | • **  | De a Anna                    | iha                                  |                 |  |
|   | Line of Section 21   |  | Tow    | mship 27-N Range   | <b>У-W</b> , ммр  | , Rio Arr                    | TDS                                  | County          |  |
| 11  | DESIGNATION OF TRAN  | NS D4  | ריער   | TER OF OIL AND NATURAL GA  | s   |                              |                                      |                 |  |
| 11.   | Name of Authorized Transport   | ter of   | 011    | or Condensate  | Address (Give address   | to which approved co         | ppy of this form is to               | be sent)        |  |
|   | El Paso Natural  | Ga   | s C    | Company  |   | mington, New                 |                                      |                 |  |
|   | Name of Authorized Transport   | ter of   | Cas    | inghead Gas or Dry Gas 🔀   | Address (Give address   |                              | •                                    | be sent)        |  |
|   | El Paso Natural Gas Company  |  |        |  | Box 990, Farmington, New Mexico  Is gas actually connected? When  |                              |                                      |                 |  |
|   | If well produces oil or liquids give location of tanks.  | 3,   |        | Unit   Sec.   Twp.   Age.   A   21   27-N   5-W  | is gas actually connec  | l l                          |                                      |                 |  |
|   |  |  |        |  | sive commingling and  | ar aumher:                   |                                      |                 |  |
|   | If this production is commin COMPLETION DATA   | ngtea  | wit    | h that from any other lease or pool,   | give comminging orde  | number.                      |                                      |                 |  |
|   | Designate Type of Co   | ampl   | etio   | Oil Well Gas Well  | New Well Workover   | Deepen Plus                  | g Back   Same Rest                   | Diff. Restv.    |  |
|   |  | Jiipi  |        |  | X Tatal Death   | 1 0 0                        | .T.D.                                | -1              |  |
|   | Date Spudded 6-29-71   |  |        | 7-23-71  | Total Depth 7838  |                              | 7824                                 |                 |  |
|   | Elevations (DF, RKB, RT, CF  | R, etc   |        | Name of Producing Formation  | Top % Gas Pay   | Tüb                          | ing Depth                            |                 |  |
|   | 6574' GL   |  | ,      | Dakota   | 7542  |                              | 7774                                 |                 |  |
|   | Perforations   |  |        |  |   |                              | oth Casing Shoe                      |                 |  |
|   | 7542-54,7574-86,7648-54,7667-79,7722-34,7754   |  |        |  | -66 7838  |                              |                                      |                 |  |
|   | UOL E 6175   |  |        | TUBING, CASING, AND  | DEPTH S   |                              | SACKS CEME                           | TIT             |  |
|   | 13 3/4"  |  |        | 9 5/8"   | 240   |                              | 190                                  |                 |  |
|   | 8 3/4"   |  |        | 7''  | 3675  |                              | 130                                  |                 |  |
|   | 6 1/4"   |  |        | 4 1/2"   | 7838  |                              | 330                                  |                 |  |
|   |  | 1 1/2" 7774 tubing  TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- |        |  |   |                              |                                      |                 |  |
| ν.  | TEST DATA AND REQU<br>OIL WELL   | JEST   | FC     | OR ALLOWABLE (Test must be a) able for this de   | fter recovery of total vol<br>pth or be for full 24 how   | ume of load oil and m<br>'s) | sust be equal to or ex               | casa top attow- |  |
|   | Date First New Cil Run To T  | ank s  |        | Date of Test   | Producing Method (Flo   | w, pump, zas lift, etc       | 2 Chine                              |                 |  |
|   |  |  |        |  |   |                              | 100000                               |                 |  |
|   | Length of Test   | ength of Test Tubing Pressure Casing Pressure Chole  |        | 4 0 1  | 1 0 1971  |                              |                                      |                 |  |
|   | Actual Prod. During Test   |  |        | Oil-Bbls.  | Water-Bbls.   | Ga                           | -MCAUG 1 8 1                         |                 |  |
|   |  |  |        |  |   |                              | 1                                    | ,Uite           |  |
|   |  | OIL CON. COM.  |        |  |   |                              |                                      | 3/              |  |
|   | GAS WELL   |  |        |  | Bbls. Condensate/MM   | Grand Grand                  | ivity of Condensate                  |                 |  |
|   | Actual Prod. Test-MCF/D<br>7585  |  |        | Length of Test 3 hours   | Bara. Condensato, www.  |                              | , 5. 55                              |                 |  |
|   | Testing Method (pitot, back p  | pr.)   |        | Tubing Pressure (Shut-in)  | Casing Pressure (Shu  | t-in) Cho                    | oke Size                             |                 |  |
|   | Calc. A.O.F.   |  |        | 2551   | 2391  |                              | 3/4"                                 |                 |  |
| V1.   | CERTIFICATE OF COM   | PLI  | ANO    | CE .   | OIL   | CONSERVATIO                  | N COMMISSION                         | ŀ               |  |
|   |  |  |        |  | AUG 3 1 1971  |                              |                                      |                 |  |
|   | Commission have been com   | nnlie  | od w   | egulations of the Oil Conservation with and that the information given   | W. I. WOARD   |                              |                                      |                 |  |
| Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.  Original Signes + H wells |  |  |        | best of my knowledge and bellef.   | This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended |                              |                                      |                 |  |
|   |  |  |        |  |   |                              |                                      |                 |  |
|   |  |  |        |  |   |                              |                                      |                 |  |
|   |  |  |        |  |   |                              |                                      |                 |  |
|   | (Signature) well, this form must be accompanied by a tabulation of the Covidence with AULE 111.  |  |        |  |   | (De CeAla, fou               |                                      |                 |  |
|   | Petroleum Engineer All sections of this form must be filled out completely for                   |  |        |  | ely for allow-  |                              |                                      |                 |  |
|   | Account 16 107   | (Tit   | ile)   | able on new and recompleted wells.   |   |                              |                                      |                 |  |
|   | August 16, 1977  | (Du  | (e)    | well name or number, or transporter or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply |   |                              |                                      |                 |  |
| ٠   |  |  |        |  | Separate Form   | ne C-104 must be             | filled for each po                   | of to multiply  |  |
|   |  |  |        |  | a compressor recession  |                              |                                      |                 |  |