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

	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104				
-	SANTA FE	Effective 1-1-65				
-	FILE	AND AND				
1	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL (GAS		
l	LAND OFFICE					
	TRANSPORTER OIL /					
	GAS /					
	OPERATOR 2					
1.	PRORATION OFFICE Operator					
	El Paso Natural Gas Co	ompany				
	Address					
	Box 990, Farmington, 1	New Mexico 87401				
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of:				
	Recompletion	Otl Dry Gas	·			
	Change in Ownership	Casinghead Gas Condens	sate			
	Malana of american give name		•			
	If change of ownership give name and address of previous owner					
	_					
II.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Fo	ormation Kind of Leas	e Lease No.		
	San Juan 28-6 Unit	161 Basin Dakota	Ci-t- Enden	or Fee SF 1/9363		
	Location		:			
		60 Feet From The North Line	e and 1775 Feet From	The East		
	Unit Letter G: 146	70 Feet 1 10.11 1 110				
	Line of Section 12 Town	ship 27-N Range 6-W	, NMPM, Ric	Arriba County		
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give address to which appro	and convolution form to the sent!		
	Name of Authorized Transporter of Oil	or Condensate 🔀	Address folde datress to which apple	1		
	El Paso Natural Gas Cor Name of Authorized Transporter of Casi	npany	Box 990. Farmington, Address (Give address to which appro	New Mexico		
	Name of Authorized Transporter of Cast	nghead Gas or Dry Gas X	1	!		
	El Paso Natural Gas Cor	mpany	Box 990, Farmington. Is gas actually connected?	New Mexico		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	is gas detudify connected?			
	give location of tanks.					
	If this production is commingled with	n that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion	n - (X)	x			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	7-15-71	8-6-71	· 7643'	7618		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top 124/Gas Pay	Tubing Depth		
	6413' GL	Dakota	7406	7604		
	Perforations			Depth Casing Shoe		
	7406-18,7510-22,7554-6	0,7570-76,7598-7610		7643		
		TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	13 3/4"	9 5/8"	3429	130		
	8 3/4"	7"	7643 '	330		
	6 1/4"	4 1/2"	7604	tubing		
				l and must be equal to or exceed top allow-		
V	. TEST DATA AND REQUEST FO	oble for this de	epth or be for full 24 hours)			
	OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
				Choke giz		
	Length of Test	Tubing Pressure	Casing Pressure	CHOST MEKENTIA FR		
		· .	Water - Bble.	Gas-MCF AUG 2 4 1971		
	Actual Prod. During Test	Otl-Bbls.	Water - Bbis.	MUU S		
				OIL CON. COM.		
	DIST. 3					
	GAS WELL	I	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test				
	5433 MCF/D 1. Teeting Method (pitot, back pr.)	3 hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
		2675	2677	3/4"		
	Calculated A.O.F.		OIL CONSERV	ATION COMMISSION		
VI	. CERTIFICATE OF COMPLIAN	CE	11	- 14 SEP 1 6 1971		
	I hereby certify that the rules and	regulations of the Oil Conservation	II ACEROVED			
			a the samed	by Emery C. Arnold		
	above is true and complete to the best of my knowledge and belief.		i1			
				TITLE SUPERVISOR DIDL #4		
			This form is to be filed in compliance with RULE 1104.			
	If this is a request for allowable for a newly of well, this form must be accompanied by a tabulation of taken on the well in accordance with RULE			Denember of hellish when a see a consultation		
	Datus I aum Produces	. \	Att meetions of this form	All sections of this form must be filled out completely for allow-		
	Petroleum Engineer (Tüle)		able on new and recompleted wells.			
	August 19, 1971		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.			
		ate)	il well name or number, or transp	just be filed for each pool in multiply		
			Separate Forms C-104 in completed wells.	······································		