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	NO. OF COPIES RECEIVED			\				
	DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104				
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Elfoctive 1-1-65				
	FILE /		AND	Filectiae 1-1-02				
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL O	SAS				
	LAND OFFICE							
	TRANSPORTER OIL /							
	GAS /							
	OPERATOR /							
1.	PROPATION OFFICE							
	Operator TI Day Nickward Con Community							
	El Paso Natural Gas Company							
	Address							
	PO Box 990, Farmi							
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New Well	Change in Transporter of:						
	Recompletion	OII Dry Ga	rs <u> </u>					
	Change in Ownership	Casinghead Gas Conder	nsate					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND I	Well No.: Pool Name, Including F	ormation Kind of Lease	Lease No.				
	Lease Name							
	San Juan 27-5 Unit	152 Tapacito Pictor	ured Chins	E - 290-3				
	Unit Letter E; 1500 Feet From The North Line and 1000 Feet From The West							
	Line of Section 16 Tow	mship 27N Range	5W , NMPM,	Rio Arriba County				
	Eme of Section 10	2/11						
122	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	ıs					
ILL.	Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro-	ved copy of this form is to be sen!)				
٠	El Paso Natural Ga		PO Box 990, Farmington	n. NM 87401				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)					
	El Paso Natural Ga		PO Box 990, Farmington	n. NM 87401				
	<u> </u>	Unit Sec. Twp. P.ge.	Is gas actually connected? Who					
	If well produces oil or liquids, give location of tanks.	E 16 27N 5W	i					
	If this production is commingled with that from any other lease or pool, give commingling order number:							
		h 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 Resty. Diff. Resty.				
	Designate Type of Completio		X					
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Date Spudded	7-6-73	3508'	3498'				
	5-8-73	Name of Producing Formation	Top X:1/Gas Pay	Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)	Pictured Cliffs	3368'	tubingless				
	6564'GL	Fictured Citis	3300	Depth Casing Shoe				
	Perforations 3368-88' and 3398-	-3408'		3508'				
	TUBING, CASING, AND CEMENTING RECORD							
				SACKS CEMENT				
	HOLE SIZE	8 5/8"	125'	107 cu. ft.				
	12 1/4"		- 					
	6 3/4"	2 7/8"	3508'	255 cu. ft.				
		tubingless		<u> </u>				
		<u> </u>						
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allou				
	OIL WELL							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (F. 10W, Pamp, gas 11					
				Ghot 3)				
	Length of Test	Tubing Pre 1 Inc	Continue Press to	and I do a				
			Wester Phila	Gas-MCF][] 2 () 1973				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas MCE 1 1 5 1 1613				
	1		i	· · · · /				

Length of Test	Tubing Pre 1 inc	Control Personal	Ond St A Co
Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas MCFJUL 2 () 1973
CAC WEY I			OIL CON. CO
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate

2964 3 hrs. Choke Size Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Testing Method (pitot, back pr.) 3/4" 807 tubingless Calc. AOF

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.

above is true and complete to the best of my knowledge and bottom			
S. G. Buice			
(Signature) Drilling Clerk			
(Title)			
July 18, 1973			
(Daie)			

OIL CONSERVATION COMMISSION

APPROVED JUL 2 0 1973 Original Signed by A. R. Kendrick PETROLEUM ENGINEER DIST. NO. 3 TITLE.

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.

Fift 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.