AU DI CALLETTE			,
DISTRIBUTION		CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUES	T FOR ALLOWABLE	Supersedes Old C+104 and C+110 Effective 1-1-65
F11.1.	AUTHODIZATION TO TE	AND RANSPORT OIL AND NATURAL G	AC
U.S.G.S.	AUTHORIZATION TO TR	CANSPORT OIL AND NATURAL G	5A3
OIL /	-		
TRANSPORTER GAS	7		
OPERATOR !			
I. PRORATION OFFICE			
El Paso Natural (	Gas Company		
Address D. C. Box 990 F	Farmington, New Mexico	0 87401	
Reason(s) for I-ling (Check proper bo	ox)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry C	Gas X	
Change in Ownership	Casinghead Gas Cond	lensate	
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND	D LEASE	Formation Kind of Lease	Lease No.
Lease Name	Well No. Pool Name, Including	Carrier Dudies	CT 070403
San Juan 27-5 Unit	158 Tapacito P.	<u> </u>	<u></u>
1	850 Feet From The South L		The East
Line of Section 25	Cownship 27N Range	5W , NMPM, R	io Arriba County
II. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	Add. ess force address to miner appro-	
Fl Paso Natural G	as Company	P. O. Box 990, Farm	ington, New Mexico
Name of Authorized Transporter of	Casinghead Gas i or Dry Gas S		rmington, New Mexico
Northwest Pipeline	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh	
If well produces oil or liquids, give location of tanks.	O 25 27N 5W	!	
	with that from any other lease or poo	l, give commingling order number:	
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.
Designate Type of Comple	tion = (X)	x	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11/4/73	6/14/74	4114' Top <b>%</b> 1/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.		3966	Tubingless
7165' GL	Pictured Cliffs	3,00	Depth Casing Shoe
3966-76, 3986-96,	4008-20		
		ND CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	0EPTH SET	106 cubic feet
12 1/4"	8 5/8" 2 7/8"	4114'	321 cubic feet
6 3/4"	2 1/8	1111	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	e after recovery of total volume of load oil	and must be equal to or exceed top allow
OIL WELL		depth or be for full 24 hours)  Froducing Method (Flow, pump, gas l	ift, etc.)
Date First New Oil Run To Tanks	Date of Test	Producting the second of the s	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
The state of the s	Oil-Bbis.	Water-Bbls.	Gas-MCF
Actual Prod. During Test			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Flod. 1001-MO1/D	2 1		<b>!</b>

3 hours 2470 Coming Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 3/4" Calc. AOF OIL CONSERVATION COMMISSION

APPROVED\_

## 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.

M. H. Bic	ہن	CALLED !
	(Signature)	
Drilling Clerk		10.13
	(Title)	- CM.
June 21, 1974		COW.
	(Date)	$\sqrt{\sqrt{3}}$

By Original Signed by Emery C. Arnold SUPERVISOR DISE. #3

1 5 x 40 7 x 5

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