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	HO. OF COPIES RECEIVED	]		/	
	DISTRIBUTION	NEW MEXICO OIL (	CONSERVATION COMMISSION	Form C-104	
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110	
	FILE AND Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS	
	OIL /	-			
	TRANSPORTER GAS I	1		And the second s	
	OPERATOR /	· ·		•	
1.	PRORATION OFFICE	1	• •		
•	Operator			20 1	
	El Paso Natural Gas Co	mpany		5 2 3 CON.	
	Address			SE CO	
	P. O. Box 990, Farming Reason(s) for filing (Check proper box	gton, New Mexico 87401	101	012 03	
	New Well	Change in Transporter of:	Other (Please explain)	On Dis	
	Recompletion	OII Dry Go			
	Change in Ownership	Casinghead Gas Conde	<del>=</del>		
-	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND	LEASE.   Well No.   Pool Name, Including F	ormation Kind of Lease		
			1	}	
	San Juan 28-6 Unit	191   South Blanco I	P.C.	( )	
	Unit Letter 0; 908 Feet From The S Line and 1850 Feet From The E				
	Line of Section 11 Tov	waship 27N Range	6W , NMPM, Rio Ar	riha County	
			11011	1104	
ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA			
			Address (Give address to which approx		
	El Paso Natural Gas Co	ompany Singhead Gas or Dry Gas 👽	P. O. Box 990. Farming Address (Give address to which approx	ton, NM 87401	
	_ *		i		
	El Paso Natural Gas Co	Unit Sec. Twp. Pge.	P. O. Box 990, Farming	ton, NM 87401	
	If well produces oil or liquids, give location of tanks.		1.5 94.5		
		10 11 27N 6W		<del></del>	
	COMPLETION DATA	th that from any other lease or pool,	give comminging order number:		
	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
		i	X	<u> </u>	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	05-14-74	09-11-74 Name of Producing Formation	3174' Top OX/Gas Pay	3163' Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)		1		
	6290' GL	Pictured Cliff	3038	Tubingless Depth Casing Shoe	
	3038-46', 3056-72', 3082-98'			3174'	
			CEMENTING RECORD	J 22 1	
	HOLE SIZE	CASING & TUBING SIZE	. DEPTH SET	SACKS CEMENT	
	12 1/4"	8 5/8"	130'	112 cu. ft.	
	7 7/8" and 6 3/4"	2 7/8"	3174'	360 cu. ft.	
		Tubingless		ļ	
				·	
V.	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 of able for this depth or be for full 24 hours)				
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	t, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
				<u> </u>	
	C.4.C. W.T. T				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	674 Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Calc A.O.F.		668	3/411	
VI.	CERTIFICATE OF COMPLIANCE	CE CE	OIL CONSERVA	TION COMMISSION	
	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.  A. Duceo (Signature)  Drilling Clerk		SEP 20 1974		
			Original Signed by Fmony C. Arnold		
			TITLE SUPERVISOR DIST. #3		
			This form is to be filed in compliance with RULE 1104.  If this is a request for sllowable for a newly drilled or deepended 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 sllowable on new and recompleted wells.		
	September 18, 1974				
	(Date)		well name or number, or tran port	well name or number, or tran porter, or other such change of condition.	
			the state of the Cales must	. La filed for each nool in multiply	