

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-70

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-21971

Operator
El Paso Natural Gas CompanyAddress
Box 289, Farmington, New Mexico 87401

Person(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rincon Unit	Well No. 108A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Free	Lease No. SF079366
Location Unit Letter <u>I</u> : <u>1460</u> Feet From The <u>South</u> Line and <u>1020</u> Feet From The <u>East</u> Line of Section <u>19</u> Township <u>27-N</u> Range <u>6-W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>19</u>
	Twp. <u>27-N</u>	Rge. <u>6-W</u>
	Is gas actually connected? <u>When</u>	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 8-8-79	Date Compl. Ready to Prod. 11-13-79		Total Depth 5752'		P.B.T.D. 5736'			
Elevations (DF, RKB, RT, CR, etc.) 6509' GL	Name of Producing Formation Mesa Verde		Top Gas Pay 4718		Tubing Depth 5666'			
Perforations 4718, 4752, 4760, 4768, 4776, 4784, 4796, 4802, 4807, 4921, 4930, 4938, 4964, 4972, 4984, 5020, 5058, 5065, 5076, 5112, 5120, 5134, 5156, 5168, 5257, 5290, 5309, 5314, 5319, 5324, 5329, 5334, 5350, 5354, 5358, 5362, 5394, 5414, 5438, 5478, 5540, 5558, 5568, 5606, 5624, 5650, *					Depth Casing Shoe 5752'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		219'		224 cf.			
8 3/4"	7"		3392'		223 cf.			
6 1/4"	4 1/2" Liner		3241-5752'		438 cf.			
	2 3/8"		5666'		tubing			

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

**5669, 5707' .
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in) 1031	Casing Pressure (Shut-in) 1174	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Drilling Clerk

November 14, 1979

OIL CONSERVATION DIVISION

NOV 26 1979

APPROVED _____, 19_____
Original Signed by A. R. Kendriel
BY _____

TITLE SUPERVISOR DISTRICT # 3

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 Form C-104 must be filed for each pool in multiply completed wells.