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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1.
Effective 1-1-65

I. Operator
El Paso Natural Gas Company
Address
P. O. Box 289, Farmington, New Mexico 87401
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐
Other (Please explain)
Pumping Unit Installation 9-2-81
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rincon Unit	Well No. 99-A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Lease SF 079366
Location Unit Letter E ; 1760 Feet From The North Line and 810 Feet From The West Line of Section 27 , Township 27N Range 6W , NMPM, Rio Arriba 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"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 289, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 289, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks. E	Unit 27 Sec. 27N Rge. 6W Is gas actually connected? Yes When

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'v.	Diff. Res'v.
		X						
Date Spudded 9-03-79	Date Compl. Ready to Prod. 2-26-80	Total Depth 5815'	P.B.T.D. 5799'					
Pool 6528' GL	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4808'	Tubing Depth 5605'					
Perforations 4808, 4837, 4845, 4853, 4861, 4869, 4889, 4900, 4908, 4988, 5145, 5188, 5229, 5351, 5356, 5363, 5369, 5375, 5381, 5396, 5401, 5406, 5411, 5425, 5453, 5464		Depth Casing Shoe 5815						
5475-5481, 5496-5506, 5520-5529		TUBING, CASING, AND CEMENTING RECORD 5581-5598, 5619-5625, 5639-5645, 5670-5674						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	223'	224 cu. ft.					
8 3/4"	7"	3496'	231 cu. ft.					
6 1/4"	4 1/2" liner	3342-5815	431 cu. ft.					
	2 3/8"	5605'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

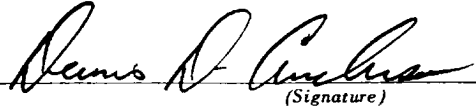
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Mcf

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure 483	Casing Pressure 1050	Choke Size

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.


(Signature)
Production Engineer
(Title)
9-9-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED **SEP 16 1981**
BY **Original Signed by FRANK T. CHAVEZ**
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 Sections I, II, III, and VI only 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.