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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
El Paso Natural Gas Company

Address
Post Office Box 4289, Farmington, NM 87499

Reason(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 San Juan 27-5 Unit	Well No. 99E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, (Federal) or Fee	Lease No. SF 079491A
Location Unit Letter C ; 250 Feet From The North Line and 1570 Feet From The West	Line of Section 11	Township 27N	Range 5W	County Rio Arriba

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline	Address (Give address to which approved copy of this form is to be sent) PO Box 90, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 11	Twp. 27N	Rge. 5W	Is gas actually connected? 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	X					
Date Spudded 10-4-82	Date Compl. Ready to Prod. 12-8-82	Total Depth 8005'	P.B.T.D. 7995'					
Elevations (DF, RKB, RT, GR, etc.) 6706' GL	Name of Producing Formation Dakota	Top Oil/Gas Pay 7773'	Tubing Depth 7943'					
Perforations 7773', 7778', 7783', 7788', 7793', 7889', 7895', 7901', 7940', 7944', 7957', 7963', 7975' w 1/spz.			Depth Casing Shoe 8005'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	220'	325 cu.ft.
12 1/4"	9 5/8"	3788'	707 cu.ft.
6 1/4"	4 1/2" liner / 7 L.	6204-8004' / 3626-6322	313 cu.ft. / 6825
	2 3/8" tubing	7943'	

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

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GAS WELL

Actual Prod. Test - MCF/D 2025	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Produced Condensate
Testing Method (piros, back pr.) Calc. AOF	Tubing Pressure (shut-in) 1910	Casing Pressure (shut-in)	Choke Size 3/4"

VI. 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.

D. G. Brisco
(Signature)

Drilling Clerk

(Title)

December 14, 1982

(Date)

OIL CONSERVATION DIVISION
1-6-83
JAN 5 1983
APPROVED _____, 19____

BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 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 deviator 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 multiple completed wells.