

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION OFFICE      |     |

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 0 7 1986

OIL CON. DIV  
DIST. 3

I.

|   |   |
|---|---|
| Operator<br>El Paso Natural Gas Company   |   |
| Address<br>P. O. Box 4289, Farmington, NM 87499   |   |
| Reason(s) for filing (Check proper box)   | Other (Please explain)  |
| <input checked="" type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of:<br><input type="checkbox"/> Oil<br><input type="checkbox"/> Casinghead Gas<br><input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Condensate |

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|  |                  |  |  |                    |
|--|------------------|--|--|--------------------|
| Lease Name<br>San Juan 27-5 Unit   | Well No.<br>125E | Pool Name, including Formation<br>Basin Dakota | Kind of Lease<br>State, Federal or Fee | Lease<br>SF 079394 |
| Location<br>Unit Letter I : 1560 Feet From The South Line and 840 Feet From The East<br>Line of Section 21 Township 27N Range 5W NMPM. Rio Arriba Cou: |                  |  |  |                    |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

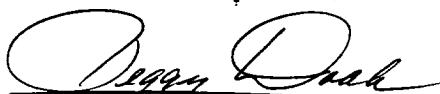
|  |   |
|--|---|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent)          |
| El Paso Natural Gas Company  | P. O. Box 4289, Farmington, NM 87499  |
| 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)          |
| Northwest Pipeline Corporation   | P. O. Box 90, Farmington, NM 87499  |
| If well produces oil or liquids,<br>give location of tanks.  | Unit : I Sec. : 21 Twp. : 27N Rge. : 5W<br>Is gas actually connected? : No When : |

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

  
(Signature)

Drilling Clerk

(Title)

1-3-86

(Date)

OIL CONSERVATION DIVISION

JAN 15 1986

APPROVED

SUPERVISOR DISTRICT # 3

BY

TITLE SUPERVISOR DISTRICT # 3

This form is to be filled in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each pool in multi-completed wells.

#### IV. COMPLETION DATA

|  |   |                          |          |          |                    |        |           |                            |       |
|--|---|--------------------------|----------|----------|--------------------|--------|-----------|----------------------------|-------|
| Designate Type of Completion - (X)   |   | Oil well                 | Gas well | New well | Workover           | Deepen | Plug Back | Same Reservoir             | Drill |
|  |   |                          | X        | X        |                    |        |           |                            |       |
| Date Spudded<br>11-28-85   | Date Compl. Ready to Prod.<br>12-30-85      | Total Depth<br>7713'     |          |          | P.B.T.D. 7700'     |        |           |                            |       |
| Elevations (DF, RKB, RT, GR, etc.)<br>6482' GL   | Name of Producing Formation<br>Basin Dakota | Top Oil/Gas Pay<br>7451' |          |          | Tubing Depth 7666' |        |           |                            |       |
| Perforations<br>7451, 7455, 7463, 7467, 7486, 7490, 7494, 7579, 7582, 7585, 7588, 7591 |   |                          |          |          |                    |        |           | Depth Casing Shoe<br>7712' |       |

\* Continued Perf's Listed Below

| TUBING, CASING, AND CEMENTING RECORD |                      |           |              |
|--------------------------------------|----------------------|-----------|--------------|
| HOLE SIZE                            | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12 1/4"                              | 9 5/8"               | 220'      | 177 cu ft    |
| 8 3/4"                               | 7"                   | 3566'     | 290 cu ft    |
| 6 1/4"                               | 4 1/2"               | 7712'     |              |
|                                      | 1 1/2"               | 7666'     |              |

#### 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 - MCF  |

#### GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test            | Bbls. Condensate/MCF      | Gravity of Condensate |
|                                  | SI 7 Days                 |                           |                       |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-In) | Casing Pressure (Shut-In) | Choke Size            |
|                                  | SI 1870                   | SI 2112                   |                       |

\* Continued Perf's:

7594, 7597, 7632, 7635, 7638, 7642, 7646, 7650, 7657, 7661, 7665, 7669, 7673 w/1 SPZ.