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-0 25 (05 64 06(81460		•	•
NO:THEIRTEL	NEW MEXICO	NEW MEXICO DILL CONSERVATION COMMISSION Form C-104	
SANTA FE	REQU	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C	
FILE		AND	1
U.S. 5.5.	AUTHORIZATION TO	TRANSPORT OIL AND NATURAL	GAS
LAND OFFICE			* *
TRANSPORTER OIL			
GAS			_
OPERATOR		22702	
PRORATION OFFICE	TION OFFICE     API #30-039-22703		
1 1			
Northwest Pipelin	e corporation		
1 =	ington, New Mexico	87401	
Reason(s) for filing (Check proper	box)	Other (l'lease explain)	
New Well	Change in Transporter ol:		
Recompletion		Dry Gus	
Change in Ownership	Casinghead Gas	Condensate	
If change of ownership give nam			
and address of previous owner		·	
I. DESCRIPTION OF WELL AN	WEITNO, Pool Name, Inclu	ding Formation   Kind of Lea	Lease No.
San Juan 29-5 Uni		Mesa Verde XXXX Fode	ralXXXXX SF 078410
I ocation	- 1.20 1 DIGHOO 1		
	10 Feet From The Sout	Line and 1760 Feet From	The East
Unit Letter U : 8	. reer rom the SOUTE		
Line of Section 31	Township 29N Rand	e 5W .NMFM. Rio	Arriba County
Line of Section			
I. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURA	AL GAS	roved copy of this form is to be sent)
Name of Authorized Transporter of	cr Concensate X =	Wadieze   Othe noniese to much app	
NORTHWEST PIPELI	NE CORPORATION	P. U. BOX 9U, Fall	nington, N.M. 87401  roved copy of this form is to be sent;
1	Casinghead Gas or Dry Gas 2	<del></del>	nington, N.M. 87401
NORTHWEST PIPELIN			When
If well produces oil or liquids,	Chit   Sec.   Twp.		
give location of tanks.		and sing commingling order number:	
If this production is commingled	with that from any other lease or	pool, give commingling order number:	
V. COMPLETION DATA	Cil Well Gas		Plug Back   Same Resty, Diff. Resty.
Designate Type of Compl	etion + (X)	X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. 5860 '
4-24-81	10-29-81	5890'	Tubing Depth
Elevations (DF, RKB, RT, GR, et.		Top Oil/Gas Pay	5690'
6605' GR	Mesa Verde	53091	Depth Casing Shoe
Perforations			5890'
5309' to 5828	THOME CASIN	G, AND CEMENTING RECORD	
	CASING & TUBING SIZ		SACKS CEMENT
12-1/4"	9-5/8"	203'	135
8-3/4"	7"	2950'	180
6-1/4"	4-1/2"	3754' - 5890'	220
	2-3/8"	5690'	<del></del>
V. TEST DATA AND REQUEST	T FOR ALLOWARIE (Test mi	ist be after recovery of total volume of load	oil and must be equal to or exceed top allow
OIL WELL	able for	this depth or be for full 24 hours)   Producing Method (Flow, pump, 201	
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, 201	
		Casing Preseure	Choxe Size
Length of Test	Tubing Pressure	Cusing Fiesame	
		Water-Bhis.	Gas-MCF
Actual Prod. During Test	CiBbls.		nec 3 = 1931
<u> </u>			20 200 2014
			OIL CON. COM.
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensation
CV 3371 AOF 537	<b>i</b> i		-
Testing Method (pitot, back pr.)	Tubing Preseure (Shut-in)	Cosing Pressure (Shut-in)	Chore Size
Back Pressure	952 psig	952 psig	2" X.750"
I. CERTIFICATE OF COMPL	IANCE		VATION COMMISSION
			C 3 1981
I hereby certify that the rules	and regulations of the Oil Conser	vetion   APPROVED	
	ed with and that the information of the best of my knowledge and i	belief. BY	ned by FRANK T. CHAVEZ
above is true and complete to	, open at my and	I) SUP	ERVISOR DISTRICT # 3

Donna J. Brac Clerk Production

1981 (Date) December

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.