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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-110  
Effective 1-1-85

API #30-039-22754

Operator Northwest Pipeline Corporation	
Address P.O. Box 90, Farmington, Farmington, N.M. 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 30-5 Unit	Well No. 74	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Foreign XXXXXXXXXX	Lease No. NM 012332
Location Unit Letter <u>K</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>2100</u> Feet From The <u>West</u> Line of Section <u>34</u> Township <u>30N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> NORTHWEST PIPELINE CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 90, FARMINGTON, N.M. 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> NORTHWEST PIPELINE CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 90, FARMINGTON, N.M. 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 6-27-81	Date Compl. Ready to Prod. 1-12-81	Total Depth 6165'	P.B.T.D. 6125'
Elevations (DF, RKB, RT, GR, etc.) 7952'	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5713'	Tubing Depth 6038'
Perforations 5713' - 6098			Depth Casing Shoe 6160'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8"	236'	115 SX
8-3/4"	7"	4135'	170 SX
6-1/4"	4-1/2"	3967' - 6160'	=
	2-3/8"	6038'	=

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 its 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 CV 1882 AOF 1985	Length of Test 3 hrs	Bbls. Condensate/MMCF -	Gravity of Condensate 50.0
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1154	Casing Pressure (Shut-in) Packer	Choke Size 2" - 750"

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.

Donna J. Brace  
Donna J. Brace  
Production Clerk  
(Title)

November 25, 1981  
(Date)

OIL CONSERVATION COMMISSION

DEC 3 1981

APPROVED \_\_\_\_\_, 19

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