

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRUCED
P.O. Drawer DD, Alameda, NM 88210

DISTRICT III
1000 Rio Grande Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TC TRANSPORT OIL AND NATURAL GAS

Operator **NORTHWEST PIPELINE CORP.** Well API No. **3003923530**
 Address **P.O. BOX 58900 SALT LAKE CITY, UTAH 84158-0900**
 Reason(s) for Filing (Check proper box) ☐ Other (Please explain)
 New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☒
 Change in Operator ☐ Gasliquid Gas ☐ Condensate ☐
 If change of operator give name and address of previous operator **GAS Transporter Change only**

II. DESCRIPTION OF WELL AND LEASE

Lease Name ROSA UNIT	Well No. 8480	Pool Name, including Formation UNDES. GALLUP	Kind of Lease State, Federal or Fee	Lease No. SF-078892
Location				
Unit Letter H	1820'	Feet From The NORTH	Line and 1210'	Feet From The EAST
Section 14	Township 31N	Range 4W	MMPM, RIO ARRIBA	
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐					Address (Give address to which approved copy of this form is to be sent)	
2810958						
Name of Authorized Transporter of Coolinghead Gas ☐ or Dry Gas ☒					Address (Give address to which approved copy of this form is to be sent)	
ANGI ASSOCIATED NATURAL GAS INC					3707 17TH STREET, SUITE 900, DENVER, CO 80202	
If well produces oil or liquids, give location of tanks.		Unit	No.	Twp.	Rge.	Is gas actually connected? YES
						When? 11/3/93

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

IV. COMPLETION DATA *Water fcl# 2810959*

Designate Type of Completion - (X)		Oil Well	Gas Well X	New Well X	Workover	Deepen	Plug Back	Seine Res'v	Diff Res'v
Date Spudded 10/30/84	Date Compl. Ready to Prod. 1/2/85	Total Depth 8750'				P.D.T.D. 8620'			
Elevations (D.P., RKB, RT, GR, etc.) 6767'	Name of Producing Formation UNDES. GALLUP	Top Oil/Gas Pay 7480'				Tubing Depth 7690'			
Perforations						Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"		19-3/8", 54.4# J55		414'		413 C.F. CI "B"			
7-7/8"		4-1/2", 11.6#, N80		8750'		3446 C.F. CI "B"			
		2-3/8" J55 EUE		7690'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of lost 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 Tank	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

NOV 2 1983
OIL COPY 21

GAS WELL

Actual Prod. Test - MCMPS Q-1062 AOF=1093	Length of Test 24 HRS.	Dbs. Condensate/MCMPS	Gravity of Condensate
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 1550	Choke Size 2" x .750

VI. OPERATOR 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.

Signature KATHY BARNEY OFFICE ASSISTANT

Printed Name 11/1/93 (801) 584-6981 Title

OIL CONSERVATION DIVISION

Date Approved NOV - 2 1993

By _____ Original Signed by CHARLES GHOLSON

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 110d

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.