

NEW MEXICO OIL AND NATURAL GAS CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form 1-194
 Superseded Old C-101 and C-1
 Effective 1-1-65

DISTRIBUTION	
STATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I.

Operator
 El Paso Natural Gas Company
 Address
 P. O. Box 990, Farmington, New Mexico 87401
 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 Sheets	Well No. 2A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or (see)	Lease No.
Location Unit Letter <u>D</u> <u>875</u> Feet From The <u>North</u> Line and <u>950</u> Feet From The <u>West</u> Line of Section <u>28</u> Township <u>31-N</u> Range <u>9-W</u> , NMPM, <u>San Juan</u> County				

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 990, Farmington, New Mexico
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)
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit <u>D</u> Sec. <u>28</u> Twp. <u>31N</u> Rge. <u>9-W</u> Is gas actually connected? <input type="checkbox"/> 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'tv.	Diff. Res'tv.
		X	X					
Date Spudded 8-25-77	Date Compl. Ready to Prod. 11-21-77	Total Depth 5728'	P.B.T.D. 5711'					
Elevations (DF, RKB, RT, GR, etc.) 6198' GR	Name of Producing Formation Mesa Verde	Top **/Gas Pay 4783'	Tubing Depth 5605'					
Perforations 4783-91, 4800-04, 4841-53, 4853-67, 4877-92, 4892-4903, 4951-55			Depth Casing Shoe					
5000-16, 5026-32, 5042-51, 5151-61, 5193-5200, 5246-59, 5269-81, 5296-			5728					
5309, 5319-26, 5346-61, 5373-93, 5415-30, 5443-53, 5463-72, 5514-16,			5536-49, 5559-67, 5593-5604'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		244'		224 cf.			
8 3/4"	7"		3415'		390 cf.			
6 1/4"	4 1/2"		5728'		425 cf.			
	2 3/8"		5605'		tubing			

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

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in) 565	Casing Pressure (shut-in) 692	Choke Size

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.

A. G. Greco
 (Signature)
 Drilling Clerk
 (Title)
 12-12-77
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED _____, 19____
 Original Signed by A. R. Kendrick
 BY _____
 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 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.
 Form C-104 must be filed for each well.

