

OPERATOR	NEW MEXICO OIL CONSERVATION COMMISSION	Form 1104 Supersedes Old C-104 and Effective 1-1-75
REQUIREMENT	REQUEST FOR ALLOWABLE	
AND		
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
OPERATOR		
EL PASO NATURAL GAS CO.		
Address		
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 ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including formation	Kind of Lease	Lease ID
HUDSON	5A	BLANCO MESA VERDE	State, Federal or Fee	SE 078604
Location				
Unit Letter	F	1500 Feet From The North	1800 Feet From The West	
Line of Section	17	Township	31-N	Range
			10-W	NMPL, San Juan

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)			
EL PASO NATURAL GAS CO.	BOX 990, FARMINGTON, NEW MEXICO			
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)			
EL PASO NATURAL GAS CO.	BOX 990, FARMINGTON, NEW MEXICO			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range
	F	17	31N	10W

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 Rest.	Diff. Rest.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		F.B.T.D.			
9/6/77	10/24/77		5427'		5411'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top of Oil Zone		Tubing Depth			
5993' GR	M.V.		4256'		5349'			
Perforations 4256, 4348, 4372, 4392, 4472, 4480, 4490, 4500, 4510, 4536, 4543, 4550,					Depth Casing Shoe			
574, 4701, 4708, 4736, 4801, 4810, 4858, 4894, 4904, 4919, 4977, 5006, 5010, 5014, 5018,					5427'			
022, 5042, 5049, 5066, 5071, 5076, 5095, 5099, 5112, 5118, 5125, 5145, 5176, 5198, 5228, 5239, 5250, 5284, 5290, 5351								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		324'		590 cF			
8 3/4"	7"		3110'		446 cF			
6 1/4"	4 1/2" liner		2959-5427'		431 cF			
	2 3/8"		5349'		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)

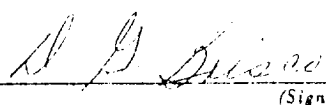
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Condensate	Gas-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	498	706	

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.

	(Signature)
Drilling Clerk	(Title)
11/11/77	(Date)

OIL CONSERVATION COMMISSION

APPROVED	19
BY	Original Signed by A. R. Kendrick
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 deviate 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.