HO. OF COPIES PER	EtyEn	کا	
різтнівит юм			
SANTA FE		1	
FILE			
U.S.G.5.			
LAND OFFICE			
TRANSPORTER	OIL	1	
INANSPORTER	GAS		
OPERATOR		1	
PROBATION OF	FICE	1	

	DISTRIBUTION  SANTA FE FILE  U.S.G.5.  LAND OFFICE  IRANSPORTER  GAS  OIL  GAS  J	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 _ GAS						
ı.	PRORATION OFFICE									
	EL PASO NATURAL GAS CO.									
	BOX 990, FARMINGTON, NEW MEXICO									
	Reason(s) for filing (Check proper box)  Other (Please explain)									
	New We!1 X	Change in Transporter of:  Oil Dry Go	as []							
	Change in Ownership	Casinghead Gas Conde	<b>一</b>							
	If change of ownership give name									
77	and address of previous owner	LEACE								
11.	Lease Name	Well No. Pool Name, Including F	İ	2000 1101						
	MUDGE	5A BLANCO P.C.	State, Fede	eral or Fee SF 078040						
		Feet From The North Liz	ne and 1663 Feet Fro	m The West						
Unit Letter C '; 815   Feet From The North   Line and   1663   Feet From The West										
	Line of Section 3 To	waship 31-N Range	11-W NMPM, San Ju	an County						
II.	II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil									
	EL PASO NATURAL GAS (		BOX 990, FARMINGTON.	ì						
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)							
	EL PASO NATURAL GAS (	Unit   Sec. Twp.   Rge.	BOX 990, FARMINGTON, NEW MEXICO							
	If well produces oil or liquids, give location of tanks.	If well produces oil or liquids,								
		th that from any other lease or pool,	give commingling order number:							
٧.	COMPLETION DATA	Cil Well Gas Weli	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.						
	Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
	Date Spudded 9/4/77	2/27/78	5549'	5531'						
	Elevations (DF, RKB, RT, GR, etc., 6132 GR	Name of Producing Formation PC	Top /Gas Pay	Tubing Depth						
	Perforations	FC .	. 2828'	2900 * Depth Casing Shoe						
	2828-36,2846-56,2870-			5549'						
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD DEPTH SET	SACKS CEMENT						
	13 3/4"	9 5/8''	221'	224 cf.						
	8 3/4"	7"	32381	470 cf.						
	6 1/4''	4 1/2" liner 1 1/4"	3066-5549¹ 2900¹	430 cf.						
٧.	TEST DATA AND REQUEST FO		ifter recovery of total volume of load o	il and must be equal to or exceed top allow-						
i	OIL WELL  Oble for this depth or oe for full 24 hours)  Date First New Cil 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-Sbls.	Water-Bbls.	Gas-MCF -						
	·									
	GAS WELL			And the second second						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	2035 Testing Method (puot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size						
	Calc. A.O.F.	1004	1004	3/4''						
I. CERTIFICATE OF COMPLIANCE			OIL CONSERV	ATION GOMMISSION						
	t handly consider that the order and t	egulations of the Oil Conservation	APPROVED							
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.		Original Signed by A. R. Kendrick								
		11	TITLE STEERING TO BE							
		This form is to be filed in compliance with RULE 1104.								
Drilling Clerk  (Tule)  3/6/78			To this in 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 NULE 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.							
							11/4	•	TI.	

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.