HO, OF COPIES REC	صا					
DISTRIBUTE	DISTRUBUTION					
SANTA FE	1					
FILS	17					
U.\$.G.\$.						
LAND OFFICE						
TRANSPORTER	OIL	1				
THANSPORTER:	GAS	1				
OPERATOR	2					
PRORATION OF	PRORATION OFFICE					

1.

V.

I.

SANTA FE		REQUEST FOR ALLOWABLE  AND							Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
U.S.G.S.				AUTH	ORIZATION	N TO TRA		OIL AN	ID NATURA	L GAS		
LAND OFFICE	OIL	-,								_ • • • • • • • • • • • • • • • • • • •		
TRANSPORTER	GAS	//										
OPERATOR		2										
PRORATION OF F	ICE			<del></del>				<del></del>				
Northwest	Pipe	elir	ne Co	orpor	ation							
PO Box 90				on, No	<u>ew Mexi</u>	co 87	401	O45 (D)				
Reason(s) for filing New Well	X	roper	oox j	Change	in Transporter	of:		Other (Pte	ease explain)			
Recompletion Change in Ownership				Oil Casingh	ead Gas	Dry Ga Conder	<b>=</b> 1				·	
If change of owners and address of prev			e									
DESCRIPTION O	F WEL	L AN	D LEA	LSE							-	
Cox Canyor	n Uni	i.t		Well No. Fool Name, Including Fo 21 Blanco Picture			- 1 07 * PO-		ease XXXXXXXX		E3089	
Location				.l	<u> </u>	<del> </del>	<del></del>				<del> </del>	
Unit Letter C		<u>. 1</u>	065 <b>'</b>	_Feet Fr	om The NOT	th Lin	e and	150'	Feet Fr	om The	est	
Line of Section	16		Townsh	321 ما	1	Range ]]	W	, NK	ирм. San	Juan		County
DESIGNATION O	F TRA	NSPO	RTER	or on	L AND NAT	URAL GA	s				•	
Name of Authorized	Transpor	ter of	011	or (	Condensate 🛚		Address (		·	•	of this form is	, i
Northwest P.					or Dry C	Gas 🔀					New Mex	
Northwest P	ipeli	ne C					<del></del>	· · · · · · · · · · · · · · · · · · ·			, New Mex	ico 87401
If well produces oil give location of tank		s,	Un	it Se	c. Twp.	Rge.	Is gas act	ually conn	nected?	When I		
If this production is COMPLETION D.		ngled	with th	at from a	ny other leas	se or pool,	give comm	ingling o	rder number:			÷
Designate Typ		omple	tion –	(X) !	1	Gas Well	New Well	Workov	er Deepen	Plug I	Back   Same Re	s'v. Diff. Res'v.
Date Spudded			Da	te Compl.	Ready to Prod	<u>X</u>	X Total Dep	th		P.B.T	.D.	
6-18-77	6–18–77		10-10-77			3437 '			34231			
, , , , , , , , , , , , , , , , , , , ,			ducing Formati		Top Oil/Gas Pay 3324!		1	Tubing Depth				
6632 GR			BI	anco i	Pictured	CILLIS		<u> </u>			bingless Casing Shoe	
3324' to 33	5 <sup>6</sup> 1:	30 h	<u>oles</u>									
HOLE	SIZE	<del></del>	<del></del>		TUBING, CA	<del></del>	CEMENT	DEPTH		Т	SACKS CE	MENT
12 1/4"		8 5/8"			119'			85				
6 3/4"	6 3/4"		2 7/8"			34321			210			
			<del></del>				ļ	<del></del>				
TEST DATA ANI	REQU	JEST	FOR	ALLOW/	ABLE (Tes	st must be a e for this de	fter recover pth or be fo	y of total u	volume of load ours)	oil and mus	t be equal:	seed top allow-
Date First New Oil I	Run To T	'ank s		Octs of Test 10-10-77			Producing Method (Flow, pump, gas lift, etc. Flow			s lift, etc.)		
Length of Test	<del></del>			bing Presi			Casing Pr			Choke	Size	
Actual Prod. During	Test		Oil	-Bbis.			Water-Bb			Gas-	wor	
GAS WELL												
Actual Prod. Test-1 CV=1678 AOF			Lei	Length of Teet 3 hrs			Bbls. Condensate/MMCF		Gravi	Gravity of Condensate		
Testing Method (pite		pr.)	Tul	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)				Choke Size		
Back Pressur				Tubingless			697 psig				0.750"	
CERTIFICATE O	F COM	PLIA	ANCE								COMMISSIO	
I hereby certify the	t the ru	les an	d regul	ations of	the Oil Con	servation	11					. 19
Commission have labove is true and	complet	mpiled te to	the be	and that st of my	knowledge a	nd belief.	BYC	rigina	l Signed	by A. R	. Kendriek	
<u> </u>	<b>)</b>			•	,		TITLE		OUTHEVES	JR DIST.	#3	
					Th	is form is	to be filed	in complia	nce with RUL			
Darlaa Ry					7.5	hie ie e	request for a	liowable fo	r a newly drill	led or deepened of the deviation		
			-	) °k			tests to	sken on t	he well in a	ccordance	with RULE 11	1.
	<u>. oauc</u>		(Title)	. IV	·	<del></del>	able or	new and	i recompleted	i wells.		etely for allow-
0	ctobe:	r 31	<u>, 19'</u>	77	····		F-1	Ino tuo II	V Sections	. II. III. e	nd VI for cha	nges of owner, ge of condition.

*i i*,