

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

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

API 30-045-22726

EL PASO NATURAL GAS CO.
Address
BOX 289, FARMINGTON, NEW MEXICO
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

DESCRIPTION OF WELL AND LEASE
Lease Name LUCERNE A Well No. 7 Pool Name, including Formation BLANCO PC Kind of Lease State, Federal or Fee SF Lease No. 078389
Location
Unit Letter H : 1550 Feet From The North Line and 870 Feet From The East
Line of Section 9 Township 31N Range 10W , NMPM, San Juan County

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 289, 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 289, FARMINGTON, NEW MEXICO
If well produces oil or liquids, give location of tanks. Unit M Sec. 9 Twp. 31N Rge. 10W Is gas actually connected? When

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

COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 4/2/78 Date Compl. Ready to Prod. 9/13/78 Total Depth 3133' P.B.T.D. 3122'
Locations (DF, RKB, RT, GR, etc.) 6169' GL Name of Producing Formation PC Top Gas Pay 2990' Tubing Depth
Perforations 2990, 2996, 3001, 3006, 3010, 3026, 3030, 3034 with 1 SPZ. Depth Casing Shoe 3133'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4" 8 5/8" 180' 153 cf.
6 3/4" 2 7/8" 3133' 646 cf.

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) Casing Pressure (Shut-in) Choke Size
624

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.
Drilling Clerk
10/4/78

OIL CONSERVATION COMMISSION
APPROVED JAN 8 1979, 19
BY Original Signed by A. R. Kendrick SUPERVISOR DIST. 3
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.