	NO. OF COPIES RECEIVED			1	
	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Burm C-104		Form C-104	
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-1	
	FILE.		AND	Effective 1-1-65	
	U.S.G.5.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS	
	LAND OFFICE OIL /	·			
	TRANSPORTER GAS /				
	OPERATOR /	}			
1	PROBATION OFFICE				
•.	Operator				
	EL PASO NATURAL GAS CO.				
	BOX 990, FARMINGTON, NEW MEXICO				
	Reason(s) for filing (Check proper box)  Other (Please explain)				
	New Well X Change in Transporter of:				
	Recompletion	Cil Dry Ga	s []		
	Change in Ownership	Casinghead Gas Conden	sate		
	If change of ownership give name				
	and address of previous owner				
11.	DESCRIPTION OF WELL AND I		ormation   Kind of Lease		
	Lease Name	3A BLANCO MESA			
	ATLANTIC C	JA   BLANCO MESA	VERDE.	NW 1 0007	
	Unit Letter P : 1000 Feet From The South Line and 1100 Feet From The East				
	Line of Section 31 Tow	mship 31-N Range 10	)-W , ммрм, San Jua	an County	
Ш.	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  Address (Give address to which approved copy of this form is to be sent)		
	EL PASO NATURAL GAS CO.		BOX 990, FARMINGTON, NEW MEXICO		
		Unit Sec. Twp. Ege.	Is gas actually connected? When		
	If well produces oil or liquids, give location of tanks.	P 31 31N 10W			
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:		
•••	Designate Type of Completio	Oli Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty.   Diff. Resty	
		A	X	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 5425'	5408'	
	1/19/78 Elevations (DF, RKB, RT, GR, etc.)	3/27/78  Name of Producing Formation	Top O!l/Gas Pay	Tubing Depth	
	6082' GR	MV .	4273'	5288'	
	Perforations 4273, 4290, 4335, 4	341,4347,4355,4360,4381,	4385,4392,4405,4412,4458	Depth Casing Shoe	
	4465,4471,4508,4514,4520,4528,4535,4771,4822,4837,4897,4967,4974,4980,4986, 5425' 4992,4998,5010,5015,5020,5026,5069,5080,5087,5100,5136,5185,5204,5211,5241,5299'				
			U,5136,5185,5204,5211,52	AT 3499 SACKS CEMENT	
	13 3/4"	CASING & TUBING SIZE	243'	354 cf.	
	8 3/4"	7'1	3076'	400 cf.	
	6 1/4"	4 1/2" liner	2927-5425'	438 cf	
		2 3/8"	5288'	tubing	
¥.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil a pth or be for full 24 hours)	nd must be equal to or exceed top allow	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)	
		Tubes December	Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	County Liangema		
	Actual Prod. During Test	Otl-Bble.	Water-Bbls.	Gas-MCF .	
	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	

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.

(Signatur) Drilling Clerk (Title)

VI. CERTIFICATE OF COMPLIANCE

4/18/78 (Date) OIL CONSERVATION COMMISSION

, 19. APPROVED. Original Signed by A. A. Readrick SUPERTANCE Date 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 our only Sections! II III, and V! for changes of owner, well name or number, or transporter, or other such change or condition.

Separate Forms C-194 must be filed for each pool in multiply

