## DISTRIBUTION NEW MEXICO OIL CONTERVATION COMMISSION Porm C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS 1 OPERATOR PRORATION OFFICE Operator EL PASO NATURAL GAS CO. Address BOX 289, FARMINGTON, NEW MEXICO Reoson(s) for filing (Check proper box) Other (Please explain) $\Box$ New Well Change in Transporter of: Lene mas Recompletion Dry Gas 32.9 Unit Change in Ownership Castnghead Gas Condensate If change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND LEASE Well No., Fool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee San Juan 32-9 Unit Com 82 Blanco PC NM 0608 Location Unit Letter M , 1070 South Line and 800 West Feet From The Feet From The 13 31N 10W Line of Section Township Range , NMPM, San Juan County I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | or Condensate | X | | | Address (Give address to which approved copy of this form is to be sent) BOX 289, EL PASO NATURAL GAS CO. EARMINGTON, 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 Unit Twp. F.ge. When Sec. Is gas actually connected? If well produces oil or liquids, give location of tanks. ! 13 10W Μ 31N If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Werkover Same Resty, Diff. Resty. Deepen Plug Back Designate Type of Completion - (X) Х Date Spudded Total Depth Date Compl. Ready to Prod. P.B.T.D 9/26/78 7/21/78 <u> 3343'</u> <u> 3333'</u> Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top MI/Gas Pay 6365 32061 Perforations Depth Casing Shoe 3206, 3212, 3218, 3224, 3230, 3236, 3243, 3247 with 1 SPZ <u> 3343'</u> TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12 1/4" 5/8'' 8 143' 100 cf 6 3/4" 7/8'' 2 3343' 498 cf (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Piesswe Choke Size Actual Prod. During Test Oil-Bhis. Water - Bbls. Gas-MCF

Actual Prod. Test-MCF/D Cosing Pressure (Shut-in) Teating Method (pupt, back pr.) Tubing Pressure (Shut-in) Choke Sixe 760 OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE APPROVED. 1 hereby certify that the rules and regulations of the Oil Conservation

Bbla. Condensate/MMCF

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Dute)

MIRCO (Signature)

Length of Test

Drilling Clerk

10/23/78

GAS WELL

(Tule)

Original Signed of A. R. Kendrick J. YEK (\*) J TITLE \_

Gravity of Condensate

This form is to be filed in compliance with RULE 1104.

If this is a request for ellowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tosts taken on the well in accordance with null 111.

All nections 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