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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 30-045-22984

Operator Northwest Pipeline Corporation	
Address PO Box 90, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

I. DESCRIPTION OF WELL AND LEASE	
Lease Name San Juan 32-7 Unit	Well No. 49
Kind of Lease Undesignated Pictured Cliffs XXX Federal XXXX	
Lease No. SF 078542	
Location	
Unit Letter I 1800 Feet From The South Line and 985 Feet From The East	
Line of Section 35 Township 32N Range 7W, NMPM, San Juan County	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	3539 E 30th St., Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	3539 E 30th St., Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

V. COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv.
	X X X
Date Spudded 7-7-78	Date Compl. Ready to Prod. 6-8-79
Elevations (DF, RKB, RT, GR, etc.) 6724'GR	Name of Producing Formation Pictured Cliffs
Perforations 3562' - 3544'; 19 shots	Total Depth 3875'
	Top Oil/Gas Pay 3544'
	P.B.T.D. 3863'
	Tubing Depth Tubingless
	Depth Casing Shoe 3869'
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
12-1/4"	8-5/8"
7-7/8" & 6-1/4"	2-7/8"
	DEPTH SET
	116'
	3869'
	SACKS CEMENT
	90 sks
	240 sks

V. 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
Length of Test	Producing Method (Flow, pump, gas lift, etc.)
Actual Prod. During Test	Tubing Pressure
	Casing Pressure
	Choke Size
	Water-Bbls.
	Gas-Bbls.
GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
CV 1153 AOF 1160	3 hrs
Testing Method (pitot, back pr.)	Bbls. Condensate/MMCF
Back Pressure	Tubingless
	Casing Pressure (Shut-in)
	1503 psig
	Choke Size
	2" X 0.750"

VI. 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.	
Barbara C. Rex	
(Signature)	
Production Clerk	
(Title)	
June 18, 1979	
(Date)	

OIL CONSERVATION COMMISSION	
JUN 28 1979	
APPROVED _____, 19 _____	
BY Original Signed by A. R. Kendrick	
SUPERVISOR DISTRICT # 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.	
Form C-104 must be filed for each pool in multiply	