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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

Operator EL PASO NATURAL GAS CO.	
Address BOX 289, FARMINGTON, NEW MEXICO	
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"/>

If change of ownership give name and address of previous owner _____

1. DESCRIPTION OF WELL AND LEASE

Lease Name MUDGE	Well No. 7A	Pool Name, Including Formation BLANCO MESA VERDE	Kind of Lease State, Federal or Fee SE	Lease No. 078096
Location Unit Letter C ; 1140 Feet From The N Line and 1645 Feet From The W				
Line of Section 23 Township 31N Range 11W, NMPM, San Juan County				

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) BOX 289, FARMINGTON, NEW MEXICO	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) BOX 289, FARMINGTON, NEW MEXICO	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 23
	Twp. 31N	Rge. 11W

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

3. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 10/26/78	Date Compl. Ready to Prod. 12/28/78	Total Depth 5182'	P.B.T.D. 5166'					
Elevations (DF, RKB, RT, GR, etc.) 5860'	Name of Producing Formation MV	Top Gas Pay 4746'	Tubing Depth 5124'					
Perforations 4746, 4750, 4763, 4769, 4789, 4795, 4801, 4815, 4821, 4827, 4842, 4848, 4854, 4860, 4874, 4886, 4901, 4933, 4974, 5034, 5041, 5064, 5075, 5120 w/1SPZ.			Depth Casing Shoe 5182'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	226'	224 cf.					
8 3/4"	7"	2877'	442 cf.					
6 1/4"	4 1/2" liner	2702-5182'	426 cf.					
	2 3/8"	5124'	tubing					

4. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

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 Oil - Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in) 354	Casing Pressure (shut-in) 750	Choke Size DIST. 3

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.

D. G. Buies
(Signature)
Drilling Clerk
(Title)
1/11/79
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 17 1979, 19____

BY Original Signed by A. G. Kendrick

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.