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U.S.G.S.
LAND OFFICE
TRANSPORTER OIL GAS
OPERATOR
PRORATION 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-111
Effective 1-1-65

Operator
EL PASO NATURAL GAS COMPANY
Address
BOX 289, FARMINGTON, NEW MEXICO 87401
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 Allison Unit	Well No. 51	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF 081155
Location Unit Letter N ; 1140 Feet From The South Line and 1510 Feet From The West Line of Section 21 Township 32-N Range 6-W, NMPM, San Juan County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 90, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 21
	Twp. 32N	Rge. 6W
	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.
		X	X					
Date Spudded 9-8-78	Date Compl. Ready to Prod. 10-25-78		Total Depth 6204'		P.B.T.D. 6187'			
Elevations (DF, RKB, RT, GR, etc.) 6482' Gr	Name of Producing Formation M.V.		Top Oil/Gas Pay 5612'		Tubing Depth 6089'			
Perforations 5612, 5622, 5633, 5648, 5659, 5689, 5699, 5720, 5727, 5733, 5750, 5758, 5766 5774, 5781, 5790, 5809, 5830, 5837, 5859, 5867, 5880, 5896, 5942, 5985, 5992, 6023, 6039, 6073, 6097, 6105		Depth Casing Shoe 6204'						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	217'	224 cf
8 3/4"	7"	3549'	270 cf
6 1/4"	4 1/2"	6204'	478 cf
	2 3/8"	6089'	tubing

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) 1079	Casing Pressure (Shut-in) 1184	Choke Size

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.

A. G. Lince
(Signature)
Drilling Clerk
(Title)
November 22, 1978
(Date)

OIL CONSERVATION COMMISSION
APPROVED DEC 12-6 1978
BY Frank S. Chang
TITLE DEPUTY OIL & GAS
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable from 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.