

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APL - 30-045-23191

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DISTRIBUTION	
SANTA FE	1
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	1
OIL	
GAS	
OPERATOR	
REGISTRATION OFFICE	
Operator	

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Case	Well No. 4A (PC) Blanco P.C. Ext.	Kind of Lease State, Federal or Free	Lease No. SF 078095
Location Unit Letter <u>H</u> ; <u>1450</u> Feet From The <u>North</u> Line and <u>1175</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>31-N</u> Range <u>11-W</u> , NMPM, <u>San Juan</u> 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"/> 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	
If well produces oil or liquids, give location of tanks.	Unit <u>H</u>	Sec. <u>18</u>
	Twp. <u>31-N</u>	Rge. <u>11-W</u>
	Is gas actually connected? <input type="checkbox"/> 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.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 5-30-79	Date Compl. Ready to Prod. 9-17-79		Total Depth 5483'		P.B.T.D. 5465'			
Elevations (DF, RKB, RT, GR, etc.) 6225' G.L.	Name of Producing Formation Pictured Cliffs		Top Gas Pay 2826'		Tubing Depth 2903'			
Perforations 2826-2844, 2848, 2860, 2902-2914'					Depth Casing Shoe 5483'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	222'	224 cf.
8 3/4"	7"	3195'	488 cf.
6 1/4"	4 1/2" Liner	2998-5483'	426 cf.
	1 1/4"	2903'	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 1042	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Calc. A.O.F.	Tubing Pressure (shut-in) 773	Casing Pressure (shut-in) 773	Choke Size 3/4 variable

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.D. G. Lucas
(Signature)

Drilling Clerk

(Title)

Sept. 25, 1979

(Date)

OIL CONSERVATION DIVISION

SEP 27 1979

APPROVED _____

BY _____ Original Signed by A. R. Kendrick

SUPERVISOR DISTRICT # 2

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 allow-
able 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 Form C-104 must be filed for each pool in multiply
completed wells.