

DISTRIBUTION	
SANTA FE	
FILE	
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-110
Effective 1-1-65

API 30-045-23285

I. Operator
El Paso Natural Gas
Address
Box 289, Farmington, New Mexico
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

II. DESCRIPTION OF WELL AND LEASE
Lease Name Pinon Mesa B Well No. 3 Pool Name, including Formation Basin Dakota Kind of Lease State, Federal or Fee Federal Lease No. Ute MTN
Location MOO-G-1420-0625
Unit Letter P ; 1050 Feet From The South Line and 800 Feet From The East
Line of Section 26 Township 31-N Range 14-W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Box 289, Farmington, 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 Box 289, Farmington, New Mexico
If well produces oil or liquids, give location of tanks. Unit P Sec. 26 Twp. 31-N Rge. 14-W Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:
IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Rest'v. Diff. Rest'v.
Date Spudded 4-17-79 Date Compl. Ready to Prod. 7-10-79 Total Depth 6288' P.B.T.D. 6271'
Elevations (DF, RKB, RT, GR, etc.) 5597' G L Name of Producing Formation Dakota Top Gas Pay 5982' Tubing Depth 6086'
Perforations 5982, 6022, 6044, 6046, 6052, 6058, 6064, 6070, 6092, 6111 w/ 1 SPZ Depth Casing Shoe 6288'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4" 8 5/8" 220' 165 cu. ft.
7 7/8" 4 1/2" 6288' 1499 cu. ft.
2 3/8" 6086' Tubing

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 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 COM.
Testing Method (pitot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size
1753 1751

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.
Drilling Clerk
7-16-79
OIL CONSERVATION COMMISSION
APPROVED JUL 25 1979, 19
BY Original Signed by L. E. Kendrick SUPERVISOR DISTRICT #
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 multiple