

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-045-23296

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	1
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	1
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	☒	Change In Transporter of:		Other (Please explain)
Recompletion	☐	Oil	☐	
Change In Ownership	☐	Casinghead Gas	☐	
		Dry Gas	☐	
		Condensate	☐	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Allison Unit	31	Basin Dakota	State, Federal or other	SF078459-B
Location				
Unit Letter	L	1465	Feet From The	S
Line of Section	14	Township	32-N	Range
			7-W	, NMPM,
			San Juan	County

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 Company	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)					
Northwest Pipeline Corp.	Box 90, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	14	32-N	7-W		

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'tv.	Diff. Res'tv.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-17-79	11-26-79	8473'	8466'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6853' GL	Dakota	8343'	8422'					
Perforations	8343, 8349, 8355, 8395, 8401, 8412, 8423, 8437, 8463' W/1 SPZ			Depth Casing Shoe				
				8473'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	229'	224 cu. ft.
8 3/4"	7"	4130'	345 cu. ft.
6 1/4"	4 1/2"	8473'	674 cu. ft.
	1.9"	8422'	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)

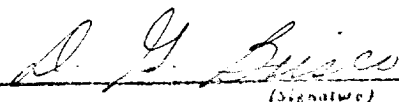
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	Choke Size
	1512	1587	

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.



Drilling Clerk

(Title)

November 28, 1979

(Date)

OIL CONSERVATION DIVISION

DEC 6 1979

APPROVED _____, 19

BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If a well is drilled or deepened 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 transportation other than change of condition.

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