

## OIL CONSERVATION DIVISION

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-045-23383

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
STATE	
FED.	
LOCAL	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address  
Box 289, Farmington, New Mexico 87401

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name Elliott A	Well No. 1 A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease Federal	Lease No. SF078095
Location Unit Letter <u>E</u> : <u>1450</u> Feet From The <u>North</u> Line and <u>980</u> Feet From The <u>West</u> Line of Section <u>19</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 E	Sec. 19
	Twp. 31-N	Rge. 11-W
	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	Some Rest'v.	Diff. Rest'v.
		X	X					
Date Spudded 5-21-79	Date Compl. Ready to Prod. 9-4-79		Total Depth 5305'		P.B.T.D. 5287'			
Elevations (DF, RKB, RT, GR, etc.) 6012' G.L.	Name of Producing Formation Mesa Verde		Top Gas Pay 4500'		Tubing Depth 5198'			
Perforations 4500, 4505, 4531, 4561, 4565, 4634, 4689, 4696, 4709, 4752, 4758, 4777, 4852, 4858, 4864, 4870, 4875, 4884, 4890, 4896, 4901, 4916, 4922, 4928, 4934, 4946, 4976, 4982, 5060, 5077, 5094, 5115, 5170, 5191, 5211, 5221'					Depth Casing Shoe 5305'			
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
13 3/4"		9 5/8"		217'		224 cf.		
8 3/4"		7"		2928'		273 cf.		
6 1/4"		4 1/2" Liner		2786-5305'		400 cf.		
		2 3/8"		5198'		tubing		

## 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)

Date First New Oil Run To Tanks	Date of	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) 551	Casing Pressure (shut-in) 954	Choke Size

## 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.

N. G. Busco  
(Signature)  
Drilling Clerk

September 10, 1979

(Date)

## OIL CONSERVATION DIVISION

SEP 17 1979

APPROVED \_\_\_\_\_, 19\_\_\_\_

Original Signed by A. R. Kendrick

BY \_\_\_\_\_

TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 3

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.