

## OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-045-23739

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Operator	

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico

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 Newberry	Well No. 4A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease <del>State</del> , Federal or <del>State</del>	Lease No. SF078146
Location				
Unit Letter <u>C</u> : <u>885</u> Feet From The <u>North</u> Line and <u>1800</u> Feet From The <u>West</u>				
Line of Section <u>9</u> Township <u>31-North</u> Range <u>12-West</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"/>	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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 289, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 9
	Twp. 31-N	Rge. 12-W
	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.
		X	X					
Date Spudded 1-27-80	Date Compl. Ready to Prod. 2-25-80		Total Depth 5420'			P.B.T.D. 5403'		
Elevations (DF, RKB, RT, GR, etc.) 6139' GL	Name of Producing Formation Mesa Verde		Top <del>Gas</del> Pay 4748'			Tubing Depth 5270'		
Perforations 4748, 4756, 4763, 4770, 4896, 4904, 4917, 4926, 4932, 4938, 4944, 4950, 4962, 4967, 4972, 4988, 4994, 5000, 5007, 5033, 5072, 5087, 5103, 5121, 5132, 5141, 5148, 5169, 5247, 5267, 5281'						Depth Casing Shoe 5420'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
13 3/4"	9 5/8 "		219'			224 cu. ft.		
8 3/4"	7"		3033'			501 cu. ft.		
6 1/4"	4 1/2" Liner		2845-5420'			434 cu. ft.		
	2 3/8"		5270'					

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
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 (spot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
	538	777	

## 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.

(Signature)

Drilling Clerk

(Title)

February 28, 1980

(Date)

## OIL CONSERVATION DIVISION

MAR 5 1980

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

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

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.