

## OIL CONSERVATION DIVISION

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
ADDRESS	
CITY	
STATE	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, NM 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 Allison Unit	Well No. 52	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State/Federal or Fee SF	Lease No. 081155
Location Unit Letter <u>N</u> : <u>890</u> Feet From The <u>South</u> Line and <u>1760</u> Feet From The <u>West</u> Line of Section <u>28</u> Township <u>32-N</u> Range <u>6-W</u> , NMPM, San Jun 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) P.O. Box 289, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. N 28 32N 6W
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	Same Res'tv.	Diff. Res'tv.
		X	X					
Date Spudded 10 -26-80	Date Compl. Ready to Prod. 5-20-81	Total Depth 6423'	P.B.T.D. 6404'					
Elevations (DF, RKB, RT, GR, etc.) 6702' GL	Name of Producing Formation M.V.	Top Oil/Gas Pay 5667'	Tubing Depth 6369'					
-5968, 5972, 5984, 5987, 5990, 5994, 5997, 6020, 6027, 6032, 6038, 6048, 6055, 6061, 6088, 6151, 6159, 6207, 6239, 6256, 6317, 6339, 6401, 6405' 5667, 5698, 5710, 5758, 5762, 5787, 5791, 5821, 5826, 5838' W/1 SPZ.			Depth Casing Shoe 6423'					
HOLE SIZE 13 3/4"	CASING & TUBING SIZE 9 5/8"	DEPTH SET 333'	SACKS CEMENT 325 cf.					
8 3/4"	7"	3823'	402 cf.					
6 1/4"	4 1/2"	3664-6422'	445 cf.					
	2 3/8"	6369'						

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 allow-  
able 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

## GAS WELL

Actual Prod. Test-MCF/D 1587	Length of Test	Bbls. Condensate/MMCF	GLS/D Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-In) 1025	Casing Pressure (Shut-In) 1275	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.  
(Signature)

Drilling Clerk

(Title)

May 27, 1981

(Date)

## OIL CONSERVATION DIVISION

JUN 4 - 1981

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

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 destination  
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 Forms C-104 must be filed for each pool in multiply