

OIL CONSERVATION DIVISION

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REGISTRATION	
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	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

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.
Decker	1A	Blanco Mesa Verde	State, Federal or Fee	Fee
Location				
Unit Letter	E	1700 Feet From The	North Line and	825 Feet From The
Line of Section		17	Township	32-N
Range		10-W	, NMPM, San Juan County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Author and Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	☒	P.O. Box 289, Farmington, NM 87401
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 Company	☒	P.O. Box 289, Farmington, NM 87401
If well produces oil or liquids, give location of tanks	Unit	Sec.
	E	17
	Twp.	Rge.
	32N	10W

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 Resv.	Diff. Resv.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
6-21-80	5-14-81	5608'	5338'					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Gas Pay	Tubing Depth					
6119' GL	Mesa Verde	4455'	5455'					
3405, 5408, 5411, 5437, 5441, 5445, 5454, 5457, 5461, 5467, 5469, 5471' W/1		Depth Casing Shoe						
5156, 5161, 5166, 5175, 5179, 5190, 5196, 5202, 5208, 5214, 5237, 5243, 5264, 5286,		5608'						
5304, 5321' W/1 SPZ. 4455, 4523, 4563, 4780, 4790, 4806, 4814, 4821, 4862, 4883, 4907, 4936, 4949, 4977, 4990, 4999								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	221'	224 cf.					
8 3/4"	7"	3192'	442 cf.					
6 1/4"	4 1/2"	5608'	105 cf.					
	2 3/8"	5455'						

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, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bble.	Water-Bble.

5049, 5055, 5074, 5106' W/1 SPZ.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
2617			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	442	840	

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

May 26, 1981

OIL CONSERVATION DIVISION

JUN 4 - 1981

APPROVED _____, 10 _____

Original Signed by FRANK T. CHAVEZ

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 forms C-104 must be filed for each pool in multiply