				/				
-	49. 3F COP ES RECEIVED	•		/				
-	DISTRIBUTION	•						
	SANT, FE	NEW MEXICO OIL CONSERVATION COMMISSION			Form C-104			
-	FILE	REQUEST FOR ALLOWABLE			Supersedes ()id (Elifective 1-1-65			
-		-		ם אג.				
	U.S.G.S.	.; AUTHORIZA	ATION TO TR	ANSPORT OIL AND N	IATURAL G	AS		
	LAND OFFICE							
1	TRANSPORTER OIL							
	GAS							
ĺ	OPERATOR	1						
1.	PROBATION OFFICE API #30-045-24390							
i	Operator							
	Northwest Pipeline Corporation							
Ī	Address							
	P.O. Box 90, Farmington, New Mexico 87401							
1	Reasonis) for tiling (Check proper box) Other (Please explain)							
l	New Well XX Change in Transporter of:							
	ecompletion OII Dry Gas					•	ļ	
							İ	
l	Casinghead Gas Condensate							
	If change of ownership give name and address of previous owner		*+5	:				
.1.	DESCRIPTION OF WELL AND		No. 100 video 5	Tongston in	Kind of Lease		 1	
1	Lease Name Meti No. Pool Name, Including F			· · · · · · · · · · · · · · · · · · ·				
	San Juan 32-7	<u> 62 Bas</u>	<u>in Dakota </u>	Ų.	€X-X-X-1 = 3 = 1 a 1	****	F 078543	
	Location Unit Letter M: 805 Feet From The West Line and 970 Feet From The South							
	Line of Section 27 Township 32N Range 7W , NMPM, San Juan County							
Ί.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cit or Condensate XX Authorized Transporter of Cit or Condensate XX							
į								
į	Northwest Pipeline Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas XX			P.O. Box 90. F	armingto	n. New Mexico 8	7401	
Ì		Adaress (Give address to	o which approv	ed copy of this form is to	be sentj			
	Northwest Pipeline Corp	P.O. Box 90. F	P.O. Box 90, Farmington, New Mexico 87401					
1	Unit Sec. Two. Page. Is and actually connected? When							
	If well produces oil or liquids, give location of tanks.							
ļ								
	f this production is commingled with that from any other lease or pool, give commingling order number:							
¥.,	COMPLETION DATA	Oil Wel	i Gas Well	New Well Workover	Deepen	'Plug Back Same Res'	v. Diff. Restv.	
	Designate Type of Completic		i	1	1		•	
			; XX	XX	_ i	P.B.T.D.		
	Date Spudded	Date Compl. Ready	to Pred.	Total Depth				
	12-27-80	5-19-81		8250!		8211'		
j	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay		Tubing Depth		
	6675' GR Dakota		8140'		8138'			
	Periorations					Depth Casing Shoe	epth Casing Shoe	
	8140'-8202'			8247				
1	TUBING, CASING, AND CEMENTING RECORD							
ŀ	HOLE SIZE	CASING & TI		DEPTH SE		SACKS CEM	ENT	
- }	12-1/4"	9-5/8"		358'		185 sx ·		
- }	8-3/4"	3-37.0 7		3951'		200 sx		
		4-1/2"		8247'		350 sx		
	5-1/4"	2-3/8"				+		
į								
٧.	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)							
	OIL WELL	Producing Method (Flow		it, etc.)	**************************************			
	Date First New Oil Run To Tanks Date of Test		the same of the sa		•• •••••			
ł	Length of Test Tubing Pressure		Casing Present Cho		i Choke Size	 -		
ı					CROZE SIZE	OKS 2110		
1				L / KLill		1 2 2 2 2 2 2		
	Actual Proa, During Test	Cu-Bbis.		Water - bis.		Ggs-MCF		
1			11UN 1 1981					
ı								
	GAS WELL 5-19-81 OIL CON. COM.							
ſ	Actual Prod. Test-MCF/D	Length of Test		Bbis. Contensate 194.3		Gravity of Condensate		
	CV 620 AOF 625					; I ——		
ļ		Tubing Pressure (Shut-in)		Cosing Pressure (Suct 20)		Choke Size		
	Testing Method (pitot, back pr.) Back Pressure	2708 psig		2708 psig		2" x .750"		
	· · - · · · ·	, -, -, -, -, -, -, -, -, -, -, -, -, -,				1 L		

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Donna J. Brace (Signature)
Donna J. Brace (Signature)
Production Clerk
(Title)
528-81

(Date)

2" x 2708 psig OIL CONSERVATION COMMISSION

Original Signed by FRANK T. CHAVEZ APPROVED. 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 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 transporter, or other such change of condition. n server Time Cased must be filled for each most in multiply