

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

Operator El Paso Natural Gas Company	
Address P.O. Box 289, Farmington, New Mexico 87401	
Reason(s) for filing (check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>
Change in Ownership <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. 5A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State/Federal or Fee	Lease No. E 503-8
Location				
Unit Letter <u>I</u> : <u>1870</u> Feet From The <u>South</u> Line and <u>1070</u> Feet From The <u>East</u>				
Line of Section <u>16</u> Township <u>32-N</u> Range <u>7-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"/>	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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corp.	P.O. Box 90, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit <u>I</u> Sec. <u>16</u> Twp. <u>32-N</u> Rge. <u>7-W</u>
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 item's	Diff. Res'v.
		X	X					
Date Spudded 11-4-80	Date Compl. Ready to Prod. 6-25-81	Total Depth 8105'	P.B.T.D. 8097'					
Elevations (DF, RKB, RT, GR, etc.) 6471' GL	Name of Producing Formation Mesa Verde	Top Gas/Gas Pay 5415'	Tubing Depth 6064'					
			Depth Casing Shoe 8105'					

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Text 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 Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of
Testing Method (spot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	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.

D. G. Guice
(Signature)
Drilling Clerk
(Title)
September 9, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 10 1981
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 deviation
logs 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
completed wells.