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U.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
OPERATOR  
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

API 30-045-25127

Operator  
Northwest Pipeline Corporation  
Address  
P.O. Box 90, Farmington, New Mexico 87401  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE  
Lease Name  
San Juan 32-8 Unit  
Well No.  
46  
Pool Name, including Formation  
Undesignated PC  
Kind of Lease  
XXX Federal or Fee  
XXXXX  
Lease No.  
SF 079353  
Location  
Unit Letter  
H  
1820 Feet From The North Line and 790 Feet From The East  
Line of Section  
14  
Township  
32N  
Range  
8W  
NMPM, San Juan  
County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒  
Northwest Pipeline Corporation  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 90, Farmington, New Mexico 87401  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
Northwest Pipeline Corporation  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 90, Farmington, New Mexico 87401  
If well produces oil or liquids, give location of tanks.  
Unit  
Sec.  
Twp.  
Rge.  
Is gas actually connected?  
When

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA  
Designate Type of Completion - (X)  
Oil Well ☐ Gas Well ☒ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Restv. ☐ Diff. Restv. ☐  
Date Spudded  
9-5-81  
Date Compl. Ready to Prod.  
1-13-82  
Total Depth  
6443'  
P.B.T.D.  
3136' 6360'  
Elevations (DF, RKB, RT, GR, etc.)  
7007' GR  
Name of Producing Formation  
Pictured Cliffs  
Top Oil/Gas Pay  
3886'  
Tubing Depth  
3906'  
Perforations  
3886' - 3973'  
Depth Casing Shoe  
6440'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE  
12-1/4"  
8-3/4"  
6-1/2"  
CASING & TUBING SIZE  
9-5/8"  
7"  
4-1/2"  
1-1/4"  
DEPTH SET  
215'  
4350'  
4145' - 6440'  
3960'  
SACKS CEMENT  
110  
195  
230

V. 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 Size  
Actual Prod. During Test  
Oil - Bbls.  
Water - Bbls.  
Gas - MCF

GAS WELL  
Actual Prod. Test-MCF/D  
CV 3156 AOF 8041  
Length of Test  
3 hours  
Tubing Pressure (Shut-in)  
1331 psig  
Casing Pressure (shut-in)  
1331 psig  
Gravity of Condensate  
Choke Size  
2" x .750"

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. Brack  
Production Clerk  
January 25, 1981

APPROVED  
Original Signed by CHARLES GHOLSON  
BY  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 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.