ŕ	NO. OF COPIES RECEIVED	_							
ŀ	BISTRIBUTION	-							
ŀ	SANTA FE	NEW MEXICO OIL CO				SION	Form C-104	Form C-104 Supersedes Old C-104 and C-110	
Ì	REQUEST FOR ALLOWABLE AND						Effective 1-1-		
[U.\$.6.\$.	AUTHORIZA	ATION TO TRA		ÖIL AND N	ATURAL GA	S		
	LAND OFFICE	==			J	TORNE OF			
	TRANSPORTER OIL /							.	
	OPERATOR 2							j.	
1.	PRORATION OFFICE 7.						A Commence of the	<u> </u>	
	El Paso Natural Gas Company								
	Box 990, Farmington, New Mexico								
	Reason(s) for filing (Check proper bo				ther (Please	explain)	1 2 2 2 1	<i>'</i>	
	New Well Change in Transporter of:					,			
	Recompletion Oil Dry Ga				See Back for Details				
	Change in Ownership	nsate 🔲	te 🔲						
	If change of ownership give name and address of previous owner								
II.	Lease Name Well No. Pool Name, Including Formation. Kind of Lease Lease No.								
	Hubbard	2	Blanco Mes	a Verde		State, Federal o	or F X •		
	Location Unit Letter E 16	550 Feet From The	North Li	ne and	9901	Feet From Th	West	- '	
	20	2011		11W					
l	Line of Section To	ownship 328	Range		, NMPM,	Sen Ju	<u> </u>	County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate A Address (Give address to which approved copy of this form is to be sent)								
	El Paso Hatural Gas Company				Box 990, Farmington, New Mexico				
	Name of Authorized Transporter of Casinghead Gas or Dry Gas A El Paso Hatural Gas Company				Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico				
	If well produces oil or liquids, give location of tanks.		Twp. Rge.	Is gas actu	ally connected	l? When			
	f this production is commingled with that from any other lease or pool, give commingling order number:								
IV.	COMPLETION DATA	New Well	Workover	Deepen	Plug Back Same Re	s'v. Diff. Res'v.			
	Designate Type of Complet	ion - (X)	Gas Well		X	1	x		
	Date Spudded	Date Compl. Ready t		Total Dept			P.B.T.D.		
	5-10-67		6-1-6 7		56521		56371		
	Elevations (DF, RKB, RT, GR, etc.,	476' GL Nose Verde		Top MK/Gas Pay			Tubing Depth		
				5334			5536 Depth Casing Shoe		
	Perforations			cho he					
	5334-42, 5360-68, 5423-31, 5448-56, 5518-22, 55 Tubing, Casing, And				NG RECORD	<u> </u>	5652'		
	HOLE SIZE CASING & TUBING SIZE				DEPTH SE		SACKS CEMENT		
	13 3/4"	9 5/8"		172'			125 Sks.		
	8 3/4"	3 3/4"		5290*			500 Ska		
	6 1/4"	4 1/2"			652'		100 Sks.		
		2 3/8"		5	5 36'	i	Tubing		
V.	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 allow able for this depth or be for full 24 hours)								
	OIL WELL Date First New Oil Run To Tanks Date of Test					pump, gas lift,	etc.)		
					•		-		
	Length of Test	Tubing Pressure	ubing Pressure		Cosing Pressure		Choke Size		
							Corr. VOE		
	Actual Prod. During Test	ring Test Oil-Bbls.		Water - Bbls.			Gas - MCF		
	GAS WELL								
	Actual Prod. Test-MCF/D Length of Test		Bbls. Cond	Bbls. Condensate/MMCF		Gravity of Condensate			
	8314	3 Hours							
	Testing Method (pitot, back pr.)		ubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Sige		
	Calculated A.O.F.	781	781		770		3/4"		
VI.	CERTIFICATE OF COMPLIANCE				OIL CONSERVATION COMMISSION				
				ABOS	JUN 8 1967				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPRO	By Original Signed by Emery C. Arnold				
	above is true and complete to the best of my knowledge and belief.			BY On					
				SUPERVISOR DIST. #3					

This form is to be filed in compliance with RULE 1104.

TITLE _

(Signature)

(Title)

(Date)

Petroleum Engineer

June 6-1967

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

5-10-67	Rigged up Twinell Bros. rig #1. Fulled tubing, set bridge plug at \$250 for the state of a casing to 1000#, helder K.C. Perfor squeeze holes at 2630 for the same to 1000#, helder when the same continues to 1000#.
D yes	Set cement retainer at 2570'. Established circulation to surface w/15 bbls.
;	Squeezed perfs w/260 sacks cement.
5 -11- 67	
	W/000% 0. K. Drilled retainer at 4281' and cleaned out to 5490'. Drilling new hole W/gas .
5 -12- 67	Reached total depth of 5652'. Ran logs and ran 174 joints 4 1/2", 10.5#
	J-55 casing (5642') set at 5652' w/100 sacks cement preceded w/4 sacks gel
	in 25 bbls. water.
5 -13- 67	Tested casing to 4000# 0. K. P.B.T.D. 5637'. Perf. Mesa Verde 5334-42,
	5360-66, 5423-31, 5448-56, 55 18-22, 55 42-46 w/16 SPZ, frac w/54,000// 20/40
	sand, 55,700 gallons of water. Max. pr. 3700#, BDP 1000#, tr. pr. 2360-2520-2500#.
	I.R. 49.5 BFM. Dropped 5 sets of 16 balls each, flushed w/3690 gallons of
	water. ISIP -0
5-14-67	Blowing well.
5-15-67	Ran 177 joints 2 $3/8$ ", 4.7#, J-55 tubing (5526') landed at 5536', pin
	collar and sub on bottom.
6-1-67	Date well was tested.

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