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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

JUL 1 1982

O. C. D.  
ARTESIA, OFFICE

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I. Operator: El Paso Natural Gas Company

Address: 1800 Wilco Building - Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain): OIL & GAS U.S. GEOLOGICAL SURVEY

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name: <u>23</u> <u>El Paso Federal</u>	Well No.: <u>1</u>	Pool Name, Including Formation: <u>Ross Draw, Wolfcamp Detrital</u>	Kind of Lease: <u>Federal</u>
Location: Unit Letter <u>5m</u> ; <u>660</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>23</u> , Township <u>26-S</u> Range <u>30-E</u> , NMPM, <u>Eddy</u> County			

III. 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)
<u>Navajo Crude Oil Purchasing Company</u>	<u>501 N. Main</u> <u>P. O. Drawer 159 Artesia, NM 88210</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>P.O. Box 1492; El Paso, Tx. 79978</u> (Attn: Prod. Control)
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When:
Unit <u>L</u> Sec. <u>23</u> Twp. <u>26S</u> Rge. <u>30E</u>	<u>Yes</u> <u>6-29-82</u>

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 Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded <u>1-24-82</u>	Date Compl. Ready to Prod. <u>5-8-82</u>	Total Depth <u>12,820</u>	P.B.T.D. <u>12,774</u>					
Pool <u>Ross Draw</u>	Name of Producing Formation <u>Wolfcamp Detrital</u>	Top Oil/Gas Pay <u>12,266</u>	Tubing Depth <u>11,366</u>					
Perforations <u>12,266-12,302</u>	TX-92					Depth Casing Shoe <u>12,819</u>		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>17 1/2</u>	<u>13 3/8</u>		<u>346</u>		<u>375</u>			
<u>12 1/4</u>	<u>9 5/8</u>		<u>3,614</u>		<u>2,200</u>			
<u>8 3/4</u>	<u>7</u>		<u>11,701</u>		<u>1,975</u>			
<u>6 1/8</u>	<u>4 1/2</u>		<u>12,819</u>		<u>180</u>			

VI. 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>712</u>	<u>24 hrs.</u>	<u>12.74</u>	<u>58 deg.</u>
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
<u>Back Pressure</u>	<u>3265</u>	<u>Pkr.</u>	<u>8.5/64</u>

VII. 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.

John D. Deek  
(Signature)  
Supervisor Production Services  
(Title)

June 21, 1982  
(Date)

OIL CONSERVATION COMMISSION

JUL 27 1982

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Mark Walker  
TITLE OIL AND GAS INSPECTOR

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 Sections I, II, III, and VI only 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.

## OIL CONSERVATION DIVISION

P.O. DRAWER DD  
ARTESIA, NM 88210

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JUL 8 1982

DATE June 29, 1982

## NOTICE OF GAS CONNECTION

O. C. D.  
ARTESIA, OFFICE

This is to notify the Oil Conservation Division that connection for the purchase of  
gas from the El Paso Natural Gas Co. ✓  
OPERATOR

El Paso "23" Federal #1EddyM 23-26S-30ELEASE & WELLCOUNTYUNIT S-T-RRoss Draw Wolfcamp ~~Detrital~~El Paso Natural Gas Co.POOLNAME OF PURCHASER36150-01

was made on June 29, 1982  
DATE

SITE CODE & SITE WELL NUMBERMeter #58-634-01El Paso Natural Gas Co.PURCHASER

*James L. E. Smith*  
REPRESENTATIVE *he*

Assistant Chief Division DispatcherTITLE

TRE:bl

cc: Operator  
Oil Conservation Division - Santa Fe, NM  
M. E. McEuen  
R. L. Tabb  
Production Control Dept.  
Measurement Dept.  
Earl Smith  
Bob Sledge - Contracts Adm. Dept.  
File