

DISTRIBUTION  
SANTA FE  
FILE  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
OPERATOR  
PROPORTION 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-11  
Effective 1-1-85

RECEIVED

JUL 12 1982

C. C. D.

ARTESIA OFFICE

EL PASO NATURAL GAS COMPANY

Address

1800 WILCO BUILDING - MIDLAND, TEXAS 79701

Reasons for filing (check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

GAS STORAGE WELL

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|                                      |          |   |                                |
|--------------------------------------|----------|---|--------------------------------|
| Lease Name                           | Well No. | Producing Formation                                     | Kind of Lease                  |
| WASHINGTON RANCH GAS STORAGE PROJECT | 22       | WASHINGTON RANCH/GAS POOL MORROW                        | State, Federal or Free FEDERAL |
| Location                             |          |   |                                |
| Unit Letter                          | D        | 950 Feet From The North Line and 950 Feet From The West |                                |
| Line of Section                      | 34       | Township 25S Range 24E                                  | EDDY County                    |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |                                 |
|--|--|---------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>                    | Address (Give address to which approved copy of this form is to be sent) |                                 |
| 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) |                                 |
| EL PASO NATURAL GAS COMPANY  | ATTN: PRODUCTION CONTROL<br>P. O. BOX 1492, EL PASO, TEXAS 79788         |                                 |
| If well produces oil or liquids, give location of tanks.   | Unit   | Sec. Twp. Rge.                  |
|  |  | Is gas actually connected? When |
|  |  | No                              |

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

IV. COMPLETION DATA

| Designate Type of Completion - (X)   | Oil Well                    | Gas Well | New Well        | Workover | Deepen            | Plug Back | Same Res'v. | Diff. Res'v. |
|--------------------------------------|-----------------------------|----------|-----------------|----------|-------------------|-----------|-------------|--------------|
|                                      |                             | X        | X               |          |                   |           |             |              |
| Date Spudded                         | Date Compl. Ready to Prod.  |          | Total Depth     |          | P.B.T.D.          |           |             |              |
| 5-2-82                               | 6-10-82                     |          | 7000'           |          | 6967'             |           |             |              |
| Pool                                 | Name of Producing Formation |          | Top Oil/Gas Pay |          | Tubing Depth      |           |             |              |
| WASHINGTON RANCH/GAS POOL MORROW     |                             |          | 6673            |          | 6854              |           |             |              |
| Perforations                         |                             |          |                 |          | Depth Casing Shoe |           |             |              |
| 6673-6834                            |                             |          |                 |          | 6973              |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD |                             |          |                 |          |                   |           |             |              |
| HOLE SIZE                            | CASING & TUBING SIZE        |          | DEPTH SET       |          | C.C.D.            |           |             |              |
| 12 1/4                               | 9 5/8                       |          | 797             |          | 600 sx C1 C       |           |             |              |
| 8 3/4                                | 7                           |          | 6,973           |          | 500 sx C1 H       |           |             |              |
| 6 1/8                                | 2 7/8                       |          | 6,854           |          |                   |           |             |              |

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 Flow Oil Ran To Tanks | Date of Test    | Production Method (Flow, pump, gas lift, etc.) |            |
|                                  |                 |  |            |
| Length of Test                   | Tubing Pressure | Casing Pressure                                | Choke Size |
|                                  |                 |  |            |
| Actual Prod. During Test         | Oil-Bbls.       | Water-Bbls.                                    | Gas-Bbls.  |
|                                  |                 |  |            |

GAS WELL

|                               |                 |                         |                       |
|-------------------------------|-----------------|-------------------------|-----------------------|
| Actual Prod. Test-Bbls./D     | Length of Test  | Bbls. Condensate/MM BTU | Gravity of Condensate |
| 3011                          | 24 hrs          |                         |                       |
| Test Method (pilot, back pr.) | Tubing Pressure | Casing Pressure         | Choke Size            |
| Back Pressure                 | 486 psi         | 627 psi                 | 32/64"                |

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.

OIL CONSERVATION COMMISSION  
SUPERVISOR, DISTRICT II

APPROVED

BY

TITLE

SUPERVISOR, DISTRICT II

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.

John P. Deek  
(Signature)

Supervisor Production Services  
(Title)

7-2-82  
(Date)