HO. OF COPIES RECESSED		5	
NOITEBUTION			
SANTA FE		1	
FILE		1	2
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	/	
	GAS	/	
OPERATOR		1	
		T	

Form C+104	
Supersedes Old C-104 and C-1	10
Effective 1-1-65	

-	DISTRIBUTION SANTA FE / FILE / U.S.G.S.	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	LAND OFFICE					
1.	Operation OFFICE Coperator El Paso Natural Gas Com	pany				
}	Address					
	PO Box 990, Farmington, Reason(s) for filing (Check proper box)	NW 07401	Other (Please explain)			
	New Well	Change in Transporter of:		·		
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condens				
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND I	EASE. Well No. Pool Name, Including For	rmation Kind of Lease	Lease No.		
	Canyon Largo Unit	178 Otero Chacra	ct 070001			
	Unit Letter C : 990 Feet From The North Line and 1650 Feet From The			The West		
	Line of Section 14 Town	nship 25N Range	6W , NMPM, Ri	o Arriba County		
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address to which approv	ped copy of this form is to be sent)		
	Name of Authorized Transporter of Cil El Paso Natural Gas Con		PO Box 990,	Farmington, NM		
	None of Authorized Transporter of Cast	inghead Gas 🔲 or Dry Gas 🔼	Address (Give address to which approx	Farmington, NM		
	El Paso Natural Gas Con	npany Unit Sec. Twp. P.ge.	Is gas actually connected? Who			
	If well produces oil or liquids, give location of tanks. If this production is commingled with	C 14 25N 6W	give commingling order number:			
IV.	If this production is commingled with COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
•	Designate Type of Completio	n - (X)	X	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 3759'	3749'		
	8-28-72 Elevations (DF, RKB, RT, GR, etc.)	9-26-72 Name of Producing Formation Chacra	Top 001/Gas Pay	Tubing Depth tubingless		
	6650'GL Perforations			Depth Casing Shoe 3759'		
	3550-3566' and 3642-3658' TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	13 3/4"	9 5/8"	136'	178 cu. ft.		
	8 3/4" & 6 3/4"	2 7/8"	3759'	299 Cu.n.		
				and much be equal to an exceed top allow-		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours?	and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(F)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke size		
	Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas MCFOCT 12 1972		
		<u> </u>		OIL CON, COM		
	GAS WELL		Bbls. Condensate/MMCF	Gravity de Condinidate 3		
	Actual Prod. Test-MCF/D	Length of Test 3 hours				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) tubingless	Casing Pressure (Shut-in) 764	Choke Size 3/4"		
979	Calc. AOF CERTIFICATE OF COMPLIAN		OIL CONSERV	ATION COMMISSION		
VI			OCT 1 2 1972			
Petroleum Engineer (Title) Title This form If this is a well, this form tests taken on All section able on new as:						
			TITLE SUPERVISOR 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 despened If this form must be accompanied by a tabulation of the deviation oil, this form must be accompanied by a tabulation of the deviation		
			tests taken on the well in accordance little 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 conditions.			

(Cate)