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	GAS	$T_{-}$	
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	NO. OF COPIES RECEIVED  DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  OIL  GAS  OPERATOR  PRORATION OFFICE	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL	Form C-10s Supersedes Old C-104 and C-110 Effective 1-1-65		
1.	©perator El Paso Natural Gas Co	mpany				
-	Address Box 990, Farmington					
- 1	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New We!!  Recompletion  Change in Ownership	Change in Transporter of:  OII Dry Gas  Casinghead Gas Condense	ate			
L 1	f change of ownership give name					
	nd address of previous owner					
II. [	DESCRIPTION OF WELL AND L Lease Name	Well No. Post Name, Increasing 1 of	1. /	070 070074		
	Canyon Largo Unit	212 Ballard Picture	ed Cliffs State, (7 each	32 0 0 0		
	Unit Letter;167	5 Feet From The South Line	and 1150 Feet From	m The West		
	Line of Section 6 Town	nship 24N Range	6W , NMPM,	Rio Arriba County		
	THE ANGROPH	ER OF OH AND NATURAL GAS				
III.	Name of Authorized Transporter of Cil	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Cil or Condensate X  Address (Give address to which approved copy of this form is to be sent)				
	El Paso Natural Gas Co	ompany or Dry Gas X	PO Box 990. Farmington, NM 87401  Address (Give address to which approved copy of this form is to be sent)			
	El Paso Natural Gas Co	ompany	PO Box 990, Farmington, NM 87401			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. N 6 24N 6W	is gas detadify connected;			
1		h that from any other lease or pool, g	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty,		
	Designate Type of Completio	n - (X) X  Date Compl. Ready to Prod.	X   Total Depth	P.B.T.D.		
	Date Spudded 8-30-73	10-23-73	2327'	2316' Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Pictured Cliffs	Top OXI/Gas Pay 2200'	tubingless		
	6564'GL Perforations	1100000		Depth Casing Shoe		
	2200-24' and 2244-52'	TUBING, CASING, AND	CEMENTING RECORD	2321		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12 1/4"	8 5/8" 2 7/8"	127' 2327'	107 cu. ft. 216 cu. ft.		
	7 7/8" & 6 3/4"	tubingless	2021			
			t and along of land	oil and must be equal to or exceed top allow		
V.	EST 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 form. Surface of Test.  Producing Method Ruman gas lift, etc.)					
	OIL WELL Date First New Oil Run To Tanks Date of Test		V(. A / A A.			
	Length of Test	Tubing Pressure	Water-Bbil. NOV CON. CON. CON. CON.	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbil. HOV CON. C	3 / Gas-MCF		
GAS WELL  Actual Prod. Test-MCF/D Length of Test			Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D 1041	3 hrs.				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 656	Choke Size  3/4"		
	Calc. AOF tubingless		OIL CONSERVATION COMMISSION			
VI	CERTIFICATE OF COMPLIAN		APPROVED NOV 1 1973			
	I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given	BY Original Signed by Enery C. Arnold			
	above is true and complete to the	e best of my knowledge and belief.	BY	rem #3		

A & Brian	
Drilling Clerk	
November 1, 1973 (Title)	

(Date)

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 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.