August 5, 1983

(Dose)

DISTRIBUTION

SANTA FE

OIL CONSERVATION DIVISION P. O. BOX 2088

	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER OIL	REQUEST F	FOR ALLOWABLE	
	OPERATOR AUTHORIZATION TO TRAN		AND	
I.			ASPORT OIL AND NATURAL GAS	
	Operator			
	Address El Paso Exploration Company			
	Vortiges			
	Box 4289 Farmington, New Mexico 87499 Reason(s) for filing (Check proper box)			
	New Well		Other (Please explain)	
	Recompletion	Change in Transporter of:		
	Change in Ownership		=	
		Conc	densate X	
3	If change of ownership give name and address of previous owner	•		
	address of previous owner	· · · · · · · · · · · · · · · · · · ·		
Ц.	DESCRIPTION OF WELL AND LEASE			
	Lease Name	Well No. Pool Name, including	Formation Kind of Lea	180
ļ	Jicarilla 119N	10A Blanco M	lesa Verde _ State/Fede	, 1 1.00280
	Location			01070010
ı	Unit Letter D ; 80	O Feet From The North L	ine and 1150	West
- 1			Feet From	in the
L	Line of Section 7 To	ownship 26N Range	4W , NMPM, Rio A	Arriba Cou
7 1	DESIGNATION OF TRANSPOR			
Ī	Name of Authorized Transporter of O	TER OF OIL AND NATURAL G	AS	
	Giant Refining		P. O. Box 256 Farmir	roved copy of this form is to be sent) ngton, New Mexico 87401
	Name of Authorized Transporter of Co	singhead Gas or Dry Gas X		
	Northwest Pipeline		· ·	oved copy of this form is to be sent)
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Box 90, Farmington, l	
	give location of tanks.	D 7 26N 4W	w des defaulty connected?	hen
I	this production is commingled w	ith that from any other lease as and		
7. 2	f this production is commingled with that from any other lease or pool, give commingling order number:			
	Designate Type of Completi	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. R
L		8n = (X)		
- '	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
-	levations (DF, RKB, RT, GR, etc.)			
	Levelous (Dr., RRB, R1, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
-	Perforations	<u> </u>		
	Depth Casing Shoe			
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
			02711321	SACKS CEMENT
L				
_				
				<u> </u>
. T	EST DATA AND REQUEST F		ifter recovery of social volume of load oil	and must be equal to or evened top a
	IL WELL ate First New Oil Run To Tanks	2518 70" 17118 01	epin or de jor juil 24 hours)	
1	ale i het New Oli Aun 16 Tanes	Date of Test	Producing Method (Flow, pump, gas li	ft. etc.)
1	ength of Test	Tubing Pressure	TO FORTH	
	•		Casing Press () E G E II	Short stre
A	ctual Prod. During Test	Cil-Bhis.	Water-Bble.	Gastier
	•		AUG 12 198	3
_		<u> </u>		
	GAS WELL		OIL CON. DIV.	
^	ctual Prod. Test-MCF/D	Length of Test-	Bbis. Condensate/MMCFDIST. 3	Gravity of Condensate
_				:
T	esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
<u></u>				
CE	ERTIFICATE OF COMPLIANC	E '	OIL CONSERVAT	ION DIVISION
			ALIO 1 9 4000	
I h	ereby certify that the rules and re	gulations of the Oil Conservation	APPROVED AUG 1 2 1983	
Div	risiod have been complied with	and that the information given best of my knowledge and belief.	BY English (1)	
			BY wes	
			TITLE SUPERVISOR DISTRICT # 3	
(Signature)			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat	
(Tule)			All sections of this form must be filled out completely for all able on new and recompleted wells.	
	▲	91	•	

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi-

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