

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-22073

AS APPLICANT'S OFFICE	5
DISTRIBUTION	
FILE	
USE	
CERTIFICATE	
TRANSPORTER	
OPERATION	
EXPLORATION OFFICE	

Operator
El Paso Exploration CompanyAddress
Box 289, Farmington, New Mexico 87401

Reason(s) for filing (check proper box)

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

Other (Please explain)

Oper. name change

If change of ownership give name
and address of previous owner

Northwest Production Corp

DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 120 C	Well No. 16	Pool Name, including Formation S. Blanco P.C.	Kind of Lease State , Federal and	Lease No. Jic. Cont #120
Location Unit Letter <u>C</u> ; <u>860</u> Feet From The <u>North</u> Line and <u>1690</u> Feet From The <u>West</u> Line of Section <u>30</u> Township <u>26-N</u> Range <u>4-W</u> , NMPM, <u>Rio Arriba</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Inland Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1528, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 84701	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 30
	Twp. 26-N	Rge. 4-W
	Is gas actually connected? ☐ When	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reat'y.	Diff. Reat'y.
		X	X					
Date Spudded 8-9-79	Date Compl. Ready to Prod. 10-11-79		Total Depth 3343			P.B.T.D. 3332		
Elevations (DF, RAB, RT, GR, etc.) 6641 GL	Name of Producing Formation P.C.		Top Gas/Gas Pay 3188			Tubing Depth tubingless		
Perforations 3188, 3194, 3200, 3214, 3218, 3222, 3235, 3239, 3249'						Depth Casing Shoe 3343'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		140'		118 cf.			
6 3/4" & 7 7/8"	2 7/8"		3343'		260 cf.			
Tubingless Completion								

TEST DATA AND REQUEST FOR ALLOWABLE (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)

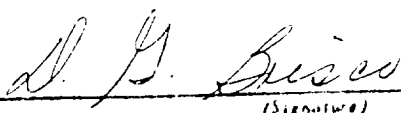
Date First New Oil Run To Tanks	Date	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1764	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pri.) Calc A.O.F.	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 816	Choke Size 3/4 Variable

CERTIFICATE OF COMPLIANCE

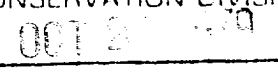
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Drilling Clerk

October 12, 1979

OIL CONSERVATION DIVISION

APPROVED  , 19

BY Original Signed by A. R. Esquivel

TITLE

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 Form C-104 must be filed for each pool in multiply recompleted wells.