

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-70REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUG 11 1982

OIL CON. COM.  
DIST. 3

El Paso Exploration Company

Address  
PO Box 289, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒

Change in Transporter of:

Recompletion ☐Oil ☐Dry Gas ☐Change in Ownership ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 119 N	Well No. 4A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Jic. Cont. #119
Location Unit Letter J : 1525 Feet From The South Line and 1460 Feet From The East Line of Section 6 Township 26N Range 4W , NMPM, Rio Arriba County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 289, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) PO Box 90, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 6	Twp. 26N	Rge. 4W	Is gas actually connected? <input type="checkbox"/>	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 res'v.	Diff. Res'v.
			X	X					
Date Spudded 7-1-82	Date Compl. Ready to Prod. 8-5-82	Total Depth 6483'			P.B.T.D. 6357' 64/65				
Elevations (DF, RKB, RT, GR, etc.) 7152' GL	Name of Producing Formation Mesa Verde	Top RH/Gas Pay 5548'			Tubing Depth 6341'				
5548', 5560', 5590', 5596', 5617', 5628', 5635', 5657', 5667', 5921', 5928', 6070', 6075', 6080', 6085', 6095', 6100', 6105', 6109', 6110', 6123', 6143', 6148', 6173', 6185', 6222', 6239', 6253', 6275', 6357' w/1 spz					Depth Casing Shoe 6483'				
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		9 5/8"		293'		177 cu.ft.			
8 3/4"		7"		4239'		272 cu.ft.			
6 1/4"		4 1/2"		4101-6483'		421 cu.ft.			
		2 3/8"		6341'					

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 New Oil Run To Tanks	Date of Test	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 1350	Length of Test 3 hrs.	Bbls. Condensate/MMCF 1 bbl/17,050 cu.ft.	Gravity of Condensate 43.3
Testing Method (pilot, back pr.) Calc. AOF	Tubing Pressure (Shot-in) 520	Casing Pressure (Shot-in) 1040	Choke Size 3/4"

## 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.

A. G. Ziseco  
(Signature)

Drilling Clerk

(Title)

August 10, 1982

(Date)

## OIL CONSERVATION DIVISION

SEP 11 1982

APPROVED \_\_\_\_\_, 19

Original Signed by FRANK T. CHAVEZ

BY \_\_\_\_\_

SUPERVISOR DISTRICT # 3

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. Form C-104 must be filed for each pool in multiple