

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company El Paso Natural Gas Company				Address Box 990, Farmington, New Mexico			
Lease San Juan 27-5 Unit		Well No. 73	Unit Letter o	Section 30	Township 27-N	Range 5-W	
Date Work Performed 5-28-62		Pool So. Blanco Pictured Cliffs			County Rio Arriba		
THIS IS A REPORT OF: (Check appropriate block)							
<input type="checkbox"/> Beginning Drilling Operations		<input type="checkbox"/> Casing Test and Cement Job		<input checked="" type="checkbox"/> Other (Explain):			
<input type="checkbox"/> Plugging		<input type="checkbox"/> Remedial Work		Water Frac			
Detailed account of work done, nature and quantity of materials used, and results obtained. Perf 3134-40(2 SPF) 3062-68; 3080-86;(1 SPF) Frac w/41,240 gallons water, 35,000# sand. Flush w/760 gallons water. I.R. 20.4 BPM. Max pr 3900#, BDP 1500#, tr pr 2800-3400#, Dropped 1 set of 12 balls.							
Witnessed by			Position		Company		
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY							
ORIGINAL WELL DATA							
D F Elev.		T D		P B T D		Producing Interval	
Completion Date		Tubing Diameter		Tubing Depth		Oil String Diameter	
Oil String Depth		Perforated Interval(s)		Open Hole Interval		Producing Formation(s)	
RESULTS OF WORKOVER							
Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD	
Before Workover							
After Workover							
OIL CONSERVATION COMMISSION				I hereby certify that the information given above is true and complete to the best of my knowledge.			
Approved by Original Signed Emery C. Arnold				Name Original Signed D. W. Meehan			
Title Supervisor Dist. # 3				Position Petroleum Engineer			
Date JUN 28 1962				Company El Paso Natural Gas Co.			

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
NUMBER OF COPIES RECEIVED		
DISTRICT OFFICE		
SANTA FE	/	
FRP	/	/
ENGINEER		
LAND OFFICE		
TRANSPORTATION		
	OIL	
	AND	
PRODUCTION OFFICE		
OPERATOR	/	

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-5 Unit	Well No. 73	Pool Name, including Formation So. Blanco Pictured Cliffs	Kind of Lease State, Federal or () Fee	Lease No.
Location				
Unit Letter <u>O</u> : <u>890</u> Feet From The <u>South</u> Line and <u>1550</u> Feet From The <u>East</u>				
Line of Section <u>30</u> Township <u>27N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected?
Unit <u>O</u> , Sec. <u>30</u> , Twp. <u>27N</u> , Rge. <u>5W</u>	<input type="checkbox"/> When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Drilling Clerk

(Title)
11-1-86
(Date)

RECEIVED
NOV 01 1986
OIL CON. DIV.
DIST. 3

OIL CONSERVATION DIVISION
NOV 01 1986

APPROVED _____, 19____
BY [Signature]
TITLE SUPERVISION DISTRICT # 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.