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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reasons 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

I. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-5 Unit	Well No. 144	Pool Name, Including Formation Basin Dakota	Kind of Lease State (Federal) or Fee	Lease No. SF 079493-A
Location				
Unit Letter K	1650	Feet From The South	Line and 1840	Feet From The West
Line of Section 35	Township 27N	Range 5W	NMPM, Rio Arriba County	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 35
	Twp. 27N	Rge. 5W
Is gas actually connected? When		

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

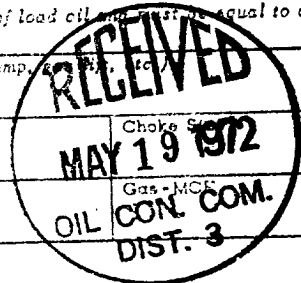
V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest.v.	Diff. Rest.v.
		X	X					
Date Spudded 2-17-72	Date Compl. Ready to Prod. 5-15-72	Total Depth 7814'	P.B.T.D. 7801'					
Elevations (DF, RKS, RT, GR, etc.) 6607'GL	Name of Producing Formation Dakota	Top Oil/Gas Pay 7586'	Tubing Depth 7770'					
Perforations 7786-92', 7764-70', 7586-92', 7694-7700'			Depth Casing Shoe 7814'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 1/4"	9 5/8"	241'	283 cu. ft.					
8 3/4"	7"	3631'	194 cu. ft.					
6 1/4"	4 1/2"	7814'	643 cu. ft.					
	1 1/2"	7770'	tubing					

V. 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, 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 1573	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Calc. AOF	Tubing Pressure (Shut-in) 1814	Casing Pressure (Shut-in) 2017	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

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

(Signature)

Petroleum Engineer
(Title)

May 18, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 19 1972, 19____
BY Original Signed by Emery C. Arnold
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.