NO. OF COPICS RECO	1	3	
DISTRIBUTIO			
SANTA FE	1		
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	′	
IRANSPORTER	GAS	/	
OPERATOR	/		
PRORATION OF			

	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION				Form Q-104 Supersedes Old C-104 and C-110						
- 1	FILE	REQUEST FOR ALLOWABLE AND							Elfective 1-1-65			
ŀ	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
ŀ												
Ì	IRANSPORTER OIL											
J	GAS	/										
Ì	OPERATOR OFFICE	-	$\dashv$									
1.	PRORATION OFFICE Operator											
	El Paso Natural	Ga	ıs C	ompany								
	PO Box 990, Farmington, NM 87401  Reason(s) for filing (Check proper box)  Other (Please explain)											
	107	roper	, c.,									
New We!! X Change in Transporter of:  Recompletion Oil Dry Gas												
	Change in Ownership Casinghead Gas Condensate											
	If change of ownership give and address of previous ow											
II.	DESCRIPTION OF WELL AND LEASE  Well No. Pool Name, Including Formation  Lease Name  Vell No. Pool Name, Including Formation  See Plance Pictured Cliffs  SF 07935											
	Rincon Unit			196	So. Blanco Pic	tured C	liffs	State, Fede	ral of Fee	DI.	079337-A	
	Location				G 1		1650			We	est	
	Unit Letter K	:	1650	Feet From	The South Lin	e and	1030	Feet From	n The			
	AND RIO Arriba											
Line of Section 26 Township 27N Range 6W , NMPM, R10 ATT (DA												
***	DESIGNATION OF TRA	NSP	ORT	ER OF OIL	AND NATURAL GA	s					,	
111.	Name of Authorized Transpo	rter o	1011	or Cor	ndensate 🔀	Address (C				of this form is i		
	El Paso Natura	l Ga	as C	Company		1	PO B	ox 990,	Farmin	gton, NM	87401	
	Name of Authorized Transpo	rter o	f Cas	inghead Gas []	or Dry Gas 🔀	PO Box 990, Fa					87401	
	El Paso Natura	I Ga	as C			la aze get	ually connec		When	8		
	If well produces oil or liquid	is,		Unit Sec.	1	1	adiry comice	. 1				
	give location of tanks.					<del></del>	ingling orde	er number:				
***	If this production is commi	ingle	d wit	h that from any								
14.	COMPLETION DATA				11 Well Gas Well X	New Well	Workover	Deepen	Plug E	Back   Same Re	stv. Diff. Restv.	
	Designate Type of C	ietic			i	1		P.B.T				
	Date Spudded			Date Compl. R	eady to Prod.	Total Dep	<sup>th</sup> 3368	ξ'	7.5.1		358'	
	9-22-73 Elevations (DF, RKB, RT, C			Name of Produc	12-3-73	Top Gx1/C			Tubino	g Depth		
	6658'GL	лκ, е.	tc.,	Name of France	Pictured Cliff	,	3266	5'			bingless	
	Perforations					Depth	opth Casing Shoe 3368'					
	<b>3266-</b> 86' and 3	296	-33									
						DCEMENT	CEMENTING RECORD  DEPTH SET			SACKS CEMENT		
	HOLE SIZE			CASING	8 5/8"		14				18 cu. ft.	
	12 1/4"	/ / !!		<del>                                     </del>	2 7/8"		3368			2	73 cu. ft.	
	7 7/8" & 6 3/	4			tubingless							
									i			
v	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)											
·	OIL WELL			Date of Test	able for this a	Producing	Method (Flo	ow, pump, ga	s lift, etc.)	1		
	Date First New Cil Run To	lans	. 3	Date of Test						/ KLL: IVEN		
	Length of Test			Tubing Pressy	Casing P	Casing Pressure C			Choke Size			
										MCF DEC	4 1973	
	Actual Prod. During Test			Oll-Bble.		Water-Bi	018.		347	OIL COR		
										DIST		
	GAS WELL Actual Prod. Test-MCF/D			Length of Tes	st	Bbls. Co	ndensate/MM	CF	Gravi	ity of Condensa		
	3917				3 hrs.				Chah	• Size		
	Testing Method (putot, back	k pr.)		Tubing Press	we (shut-in)	Casing F	ressure (Sh		Chor		3/4"	
	Calc. AOF				tubingless		107		NATION	COMMISSI		
V	I. CERTIFICATE OF CO	MPI	LIAN	CE								
	All Companyation						OVED		; ; :3/3		., 19	
	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.						Original Signed by Thomas C. A.					
						TITLE						
							his form is	to be filed	in compli	ance with RU	LE 1104.	
	A H Fines					l l	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					
	Drilling Clerk  (Title)  December 12, 1973						this form m	ust be acco	ccordance mpanied p	with RULE	111.	
							well, this form must be 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.					
		(1			Separate Forms C-104 must be filed for each pool in multiple					boot to wattibia		
				completed wells.								