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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
- AND -
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-110
Effective 1-1-65

Operator Northwest Pipeline Corporation	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☒ Casinghead Gas ☐ Condensate ☒
Recompletion ☐	
Change in Ownership ☒	

If change of ownership give name and address of previous owner El Paso Natural Gas Company, PO Box 990, Farmington, New Mexico 87401

DESCRIPTION OF WELL AND LEASE	
Lease Name Indian I	Well No. 1 Pool Name, including Formation Blanco Mesa Verde
Kind of Lease State, Federal or Fee Ind. Cont. ☒	
Location Unit Letter D : 980 Feet From The North Line and 900 Feet From The West	
Line of Section 27 Township 28N Range 3W, N.M.P.M., Rio Arriba County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When D 27 28N 3W

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 Some Rekey. D.H. Rekey.
Date Spudded	Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE DEPTH SET SACKS CEMENT

7. 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 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	Length of Test
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)
	Casing Pressure (Shut-in) Choke Size

8. 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)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED FER 7 1071, 19 1974

BY Original Signed by A. R. Kendrick

TITLE PETROLEUM ENGINEER DIST. NO. 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 logs 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 name, well name or number, or transporter or other such change of completion.

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

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OPERATOR	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AHP.
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes OHC-104 and C-119
Effective 1-1-65

Operator Northwest Pipeline Corporation	
Address 501 Airport Drive, Farmington, New Mexico 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 El Paso Natural Gas Company, PO Box 990, Farmington, New Mexico 87401

DESCRIPTION OF WELL AND LEASE

Lease Name Indian I	Well No. 1	Pool Name, including Formation Gavalin Pictured Cliffs	Kind of Lease State, Federal or Fee ☒	Lease No. Ind. Cont. 60
Location				
Unit Letter D	930	Feet From The North	Line and 900	Feet From The West
Line of Section 27	Township 28N	Range 3W	, NMPM, Rio Arriba County	

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) 501 Airport Drive, Farmington, New Mexico 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) 501 Airport Drive, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 27	Twp. 28N	Rge. 3W	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 Resv. ☐	Diff. Resv. ☐
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

ORIGINAL SIGNED BY R. L. MAHAFFEY

(Signature)

OFFICE SUPERVISOR

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 7 1974, 19

BY Original Signed by A. R. Kendrick

TITLE PETROLEUM ENGINEER DIST. NO. 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 1111.

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 ownership, well name or number, or transporter or other such change of conditions.

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