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U.S.G.S.				AUTHO	RIZATION	1 TO TRA	ANSPORT	OIL AND I	NATURAL G	SAS .		
LAND OFFICE	 _				•							
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El Paso Na	tural	Ga	s Co	ompany								
Address							··					
P. O. Box	990,	Far	ming	gton, New	Mexico	87401						
Reason(s) for filing (10	Other (Please	explain)			
New Well		•		Change in	Transporter	of:		•	d Cliffs	and Mes	a Verde	zones
Recompletion	M			Oil		Dry Go			led and r			
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and address of prev	10US OW	ner_									·	
DESCRIPTION OF	F WEL	L A!		Well No.	Pool Name, I	Including F	ormation Verde		Kind of Lease		2.1	Lease No.
DESCRIPTION OF Lease Name San Juan 2	F WEL	L A!		EASE Well No.			ormation Verde P.C. Cmg	;1d	Kind of Lease State, Federal		Fed.	1
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hoo M.V.- 5084 to 92, 5100 to 32, 5146 to 60', 5170 to 5200' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 175 10 3/4" 32.75# SW 150 sx 5/8" 26.4# J-55 200 sx 3065 5 1/2" 15.5# J-55 2 3/8" 4.7# J-55 3022-52581 300 sx 5197' (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks

Choke Size Tubing Pressure Casing Pressure Length of Test Water - Bble. Oli-Bble. Actual Prod. During Test DE

Gravity of Condensate **GAS WELL** Length of Test Bble. Condensate/MMCF Actual Prod. Test-MCF/D 191 8 day Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 362 Psia del.

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.

(Date)

OIL CONSERVATION COMMISSION

0FC 2 0 1978 APPROVED. Original Signed by A. R. Kendrick 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 NULE 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.