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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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

Operator El Paso Natural Gas Company		
Address P. O. Box 990, Farmington, New Mexico 87401		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:	Pictured Cliffs and Mesa Verde zones commingled and rod pump installed.
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 28-7 Unit	Well No. 75	Pool Name, including Formation So. Blanco P.C. Cmgld.	Kind of Lease State, Federal or Fee Fed.	Lease No. SF 079289A
Location				
Unit Letter <u>L</u> : <u>1850</u> Feet From The <u>south</u> Line and <u>890</u> Feet From The <u>west</u>				
Line of Section <u>15</u> Township <u>28N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County				

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)
El Paso Natural Gas Company	
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	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When yes

If this production is commingled with that from any other lease or pool, give commingling order number: R-5324

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X				
Date Spudded 5-7-57	Date Compl. Ready to Prod. 7-5-57	Total Depth 5260'	P.B.T.D. 5220'					
Elevations (DF, RKB, RT, GR, etc.) 6173' GR	Name of Producing Formation Pictured Cliffs Mesa Verde	Top Oil/Gas Pay 2858' 4508'	Tubing Depth 5206					
Perforations P.C.- 2863' to 2920 M.V.- 5084 to 92, 5100 to 32, 5146 to 60', 5170 to 5200'		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	10 3/4" 32.75# SW		175		150 sx.			
	7 5/8" 26.4# J-55		3065		200 sx			
	5 1/2" 15.5# J-55		3022-5258'		300 sx			
	2 3/8" 4.7# J-55		5197'		--			

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 - Bble.	Water - Bble.	Gas - MCF

GAS WELL

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

David P. Harwell
(Signature)
Production Engineer
(Title)
12-15-78
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 20 1978, 19____
BY Original Signed by A. R. Kendrick
TITLE APPROVAL

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.