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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-104 and C-110  
Effective 1-1-65

I. Operator  
**El Paso Natural Gas Company**

Address  
**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:		<b>See Back for Details</b>
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>San Juan 28-6 Unit</b>	Well No. <b>15</b>	Pool Name, Including Formation <b>Blanco Mesa Verde</b>	Kind of Lease State, Federal or Fee <input checked="" type="checkbox"/> <b>X</b>	Lease No. <b>NM 05493</b>
Location				
Unit Letter <b>M</b>	<b>990</b>	Feet From The <b>South</b>	Line and <b>990</b>	Feet From The <b>West</b>
Line of Section <b>10</b>	Township <b>28N</b>	Range <b>6W</b>	, NMPM, <b>Rio Arriba</b> County	

III. 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)
<b>El Paso Natural Gas Company</b>	<b>Box 990, Farmington, New Mexico 87401</b>
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)
<b>El Paso Natural Gas Company</b>	<b>Box 990, Farmington, New Mexico 87401</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When:
<b>M 10 28N 6W</b>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
Date Spudded <b>W/O 7-26-70</b>	Date Compl. Ready to Prod. <b>8-10-70</b>	Total Depth <b>5886'</b>	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <b>6702' GL</b>	Name of Producing Formation <b>Mesa Verde</b>	Top <del>XX</del> /Gas Pay <b>5366</b>	Tubing Depth <b>5717</b>					
Perforations <b>5366-71', 5381-86', 5403-08', 5422-27', 5442-47'</b>			Depth Casing Shoe <b>5740'</b>					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<b>13 3/4"</b>	<b>9 5/8"</b>	<b>170'</b>	<b>125 Sks.</b>					
<b>8 3/4"</b>	<b>7"</b>	<b>3775'</b>	<b>250 Sks.</b>					
	<b>5 1/2" Liner</b>	<b>3447'=5740'</b>	<b>175 Sks.</b>					
	<b>X 2 3/8"</b>	<b>5717'</b>	<b>Tubing</b>					

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 an 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 <b>7732</b>	Length of Test <b>3 Hours</b>	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) <b>Calculated A. O. F.</b>	Tubing Pressure (shut-in) <b>703</b>	Casing Pressure (shut-in) <b>706</b>	Choke Size <b>3/4"</b>

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.

Original Signed **F. H. WOOD**

(Signature)

**Petroleum Engineer**

(Title)

**September 2, 1970**

(Date)

OIL CONSERVATION COMMISSION

**SEP 8 1970**

APPROVED \_\_\_\_\_, 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 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.

# WORKOVER

7-26-70 Rigged up Aztec Well Service Rig #50. Pulled tubing, cleaning out open hole.  
7-27-70 Fishing for slips from open hole bridge plugs set prior to running liner. Drilled by junk.  
7-28-70 Made 80' of new hole. Total depth 5886'. Ran logs. Fraced open hole from 5740-5886'  
w/52,500# 20/40 sand, 59,346 gal. water. Flushed w/8400 gal. water. Set bridge plug  
at 5600', tested to 2000 psi, O. K.  
7-29-70 Perf. 5366-71', 5381-86', 5403-08', 5422-27' and 5442-47' w/16 holes per zone. Fraced  
w/28,000# 20/40 sand and 28,140 gal. water. Dropped 2 sets of 16 balls. No flush.  
7-30-70 Blowing well to clean out. Ran 190 joints 2 3/8", 4.7#, J-55 tubing (5707') set at 5717'  
w/seating nipple on bottom. Gauged 4399 MCF/D.  
8-10-70 Date well was tested.