		~1				
	DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND Refin C-104 Superseder Old C-104 and C-1 Effective 1-1-65				
	U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS /	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
I.	OPERATION / PROPATION OFFICE Operator	1				
	EL PASO NATURAL GAS COMPANY					
	Box 990, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) New We!! [X] Change in Transporter of: Recompletion Cil Dry Gas Change in Ownershir Casinghead Gas Condensate					
	If change of ownership give name and address of previous owner					
H.	DESCRIPTION OF WELL AND Lease Name San Juan 28-6	LEASE Well No. Pool Name, Including 213 Basin Dakota		Lease Federal or Fee SI	Leuse No.	
	Unit Letter A : 1180 Feet From The North Line and 1000 Feet From The East					
	Line of Section 31 To	waship 28-N Range 6	-W , NMPM, R	io Arriba	County	
II.	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) EL PASO NATURAL GAS COMPANY Box 990, Farmington, New Mexico Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)					
	EL PASO NATURAL GAS COMPANY Box 990, Farmington, New Mexico If well produces oil or liquids, Unit Sec. Twp. Bge. Is gas actually connected? When					
	give location of tanks. If this production is commingled wi COMPLETION DATA	A 31 28 N 6 W			TDW Posts	
	Designate Type of Completi		New Well Workover Deep X Total Depth	en Plug Back Same Re	estv. Diff. Restv.	
	Date Spudded 4-4-78 Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod. 6-15-78 Name of Producing Formation	7709 t	7703' Tubing Depth		
	6483 GL Perforations 7474,7488,7491	Dak.,7508,7553,7583,7587,759	7474'	7638 Depth Casing Shoe		
	W/1 SPZ. TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CE	MENT	
	13 3/4''	9 5/8''	224'	224 cf		
	8 3/4"	7''	3545'	256 cf 643 cf		
	6 1/4"	4 1/2"	7709' 7638'	Tubing		
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 top allowable for this depth or be for full 24 hours)					
	Date First New Oil Run To Tanks	Date of Test				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	<u> </u>	
	Actual Pred. During Test	Oil-Bble.	Water - Bble.		Gas-MGFet 1-	
	GAS WELL					
	Actual Prod. Tost-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensat	-	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		

2625 VI. CERTIFICATE OF COMPLIANCE

Choke Size Casing Pressure (Shut-in) OIL CONSERVATION COMMISSION 31119 Original signed by A. R. Kendrick 19. APPROVED_

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.

Testing Method (pitot, back pr.)

7/14/78

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This form is to be filed in compliance with RULE 1104.

(Signature) Drilling Clerk (Title)

(Date)

If this is a request for allowable for a newly drilled or despened 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.