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U.S.G.S.		
OIL	1	
GAS	1	
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PRORATION OFFICE		
	OIL GAS	GAS /

	NO. OF COPIES RECEIVED 15	٦			/ .	
	DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION			SION	Form C-104	
	FILE REQUEST FOR ALLOWABLE AND				Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.S.G.S.					
	IRANSPORTER OIL /	_				
	OPERATOR /					
1.	PRORATION OFFICE	-				
-	Operator					
	El Paso Natural Gas C	ompany				
	P. O. Box 990, Farmin	gton, NM 87401				
	Reason(s) for filing (Check proper both New Well	Change in Transporter of:	Other (Please e.	xplain)		
	Recompletion	OII Dry Go	as 🔲			
	Change in Ownership	Casinghead Gas Conde	nsate			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND					
	San Juan 28-7 Unit	Well No. Pool Name, Including F 230 Basin Dakota		ind of Lease tate(Federal or Fee	SF078498	
	Location				01070430	
	Unit Letter B; 80	00 Feet From The N Lir	ne and1450	Feet From The		
	Line of Section 29 To	wnship 28N Range	7W , nmpm,	Rio Arriba	County	
III.		TER OF OIL AND NATURAL GA				
	Name of Authorized Transporter of Or El Paso Natural Gas Co		Address (Give address to t			
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 💢	P. O. Box 990, I	which approved copy	of this form is to be sent)	
	El Paso Natural Gas Co	mpany Unit Sec. Twp. Rge.	P. O. Box 990, I		M 87401	
	If well produces oil or liquids, give location of tanks.	B 29 28N 7W	is gas actually connected?	l when		
IV.	If this production is commingled win COMPLETION DATA	th that from any other lease or pool,	give commingling order no	ımber:		
	Designate Type of Completic	on - (X)   Oil Well   Gas Well   X	New Well Workover	Deepen Plug B	Back   Same Resty.   Diff. Resty.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.	.D.	
	09-27-74 Elevations (DF, RKB, RT, GR, etc.)	12-04-74  Name of Producing Formation	7245' Top Wil/Gas Pay	7237	7 t g Depth	
	6139 ' GL	Dakota	7009	7158	· ·	
	Perforations 70001 70001 7	1541 71701 - 1 71041			Casing Shoe	
	7009', 7016', 7126', 7154', 7170' and 7184'  TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
	13 3/4" 8 3/4"	9 5/8"	208' 3040		cu. ft.	
	6 1/4"	4 1/2"	7245'		cu. ft.	
		1 1/2"	7158'	Tubi	ngless	
V.	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 able for this depth or be for full 24 hours)					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, p	ump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke	Size	
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - M	- A-D	
					69, CAP.	
	CACWELL				ું <b>ું</b> એ. <b>ું</b>	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate MMCF	3 hours Graves	al Concensate	
	2554	3 hours	4 48   Casing Pressure (Shut-is		W4	
	Testing Method (pitot, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 2547	2547		Variable	
VĮ.	CERTIFICATE OF COMPLIANCE		01L CONSERVATION COMMISSION			
	ereby certify that the rules and regulations of the Oil Conservation		APPROVED		DEC 1,8497A	
	Commission have been complied value is true and complete to the	original basi	ر يا الم			
	above is true and complete to the	TITLE FETROLEUM	PRODUKER DI	er. no. 3		
	12 1. 6		it			
	D. G. Busc	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.				
	(Signo					
	Drilling Clerk (Til	Orilling Clerk (Tute)			led out completely for allow-	
	December 13, 1974		Fill out only Sec	tions I. II. III. ar	nd VI for changes of owner, her such change of condition.	
	(Da	(e)	well name or number, or transporter, or other such change of condition.			

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.