4 -NMOCC	T-C7	. Pa	50
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DISTRIBUTIO	ON .		
SANTA FE		1	
FILE			
U.S.G.S.			L_
LAND OFFICE			L
TRANSPORTER	OIL		
	GAS		
OPERATOR		17	
		1	I

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}	SANTA FE /		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
- }		KEMUESI	FOR ALLOWABLE	Effective 1-1-65
ŀ	FILE	1	AND	
Ļ	U.S.G.S.	. AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL (GAS
ļ	LAND OFFICE	1		
ļ	TRANSPORTER OIL	1		
L	GAS /	<u> </u>		
	OPERATOR /			
. [PRORATION OFFICE]		
" [Operator			
-	Jerome P. McHugh			
Ì	Address			
- 1	Box 234, Farmington	n, NM 87401		
ŀ	Reason(s) for filing (Check proper box		Other (Please explain)	
	New Well X	Change in Transporter of:		
ı	一	Oil Dry Go		
- 1	Recompletion			
l	Change in Ownership	Casinghead Gas Conder	asate	
,	If change of ownership give name			
	it change of ownership give name and address of previous owner			
1.	DESCRIPTION OF WELL AND	LEASE		
7	Lease Name	Well No. Pool Name, Including F		e Lease No.
ţ	Valencia Canyon Unit	36 Choza Mesa - P	ictured Cliffs State, Federa	or Fee Federal NM-14914
ŀ	Location			1
-	E 150	00 - North	e and 1600 Feet From	w. West
-	Unit Letter F ; 150	OO Feet From The North Lin	ne and 1600 Feet From	I ne MODO
		00 27-2-17-	A Work	Arriba
	Line of Section 14 To	wnship 28 North Range	4 West , NMPM, Rio	Arriba County
I.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	is	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)
Ì				
N	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas X	Address (Give address to which appro	ved copy of this form is to be sent)
	El Paso Natural Gas		Box 990, Farmington, N	IM 87401
	El Paso Naculal Ga	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	
ı	If well produces oil or liquids,	Onit Sec. Twp. Light	is gas actually commented	
Į	give location of tanks.	<u> </u>	<u> </u>	
1	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
	COMPLETION DATA			
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
	Designate Type of Completic	on - (X) ! X	X	1 1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	5-26-78	6-22-78	4300°	4255'
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	7177' GR	Pictured Cliffs	3924	4130'
		Pictared Ciris	3324	Depth Casing Shoe
ı	Perforations	2004 4004 4100 00 4103	00	
	3924-38, 3972-84, .	3994-4024, 4102-22, 4123	-82	
			CEMENTING RECORD	T
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	12-1/4	85/8	217' RKB	135 sx
- 1		4-1/2	4300'	927.5 cu ft
ł		1-1/4	4130'	
l			time of social values of land oil	and must be equal to or exceed top allow-
V.	TEST DATA AND REQUEST F		epth or be for full 24 hours)	and must be equal to or exceed top aroun
:	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)
	Date First New Oil Hun 10 lanks	Date of test		
l		1		Choke Size
				0
	Length of Test	Tubing Pressure	Casing Pressure	
	Length of Test	Tubing Pressure		
	Length of Test Actual Prod. During Test	Tubing Pressure Oil-Bbis.	Casing Pressure Water-Bbls.	Gas-MCF
				Gas-MCF
				Gas-MCF
	Actual Prod. During Test			Gas - MCF
	Actual Prod. During Test GAS WELL	Oil-Bbis.		Gravity of Condersate
	Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Oil-Bbis.	Water-Bbls.	
	GAS WELL Actual Prod. Test-MCF/D 3893 AOF	Length of Test 3 hrs	Water-Bbls. Bbls. Condensate/MMCF	Gravity of Condensate
	GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.)	Length of Test 3 hrs Tubing Pressure(Shut-in)	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Canderieate Choke Size
	GAS WELL Actual Prod. Test-MCF/D 3893 AOF	Length of Test 3 hrs	Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST	Choke Size 3/4" Pos. Choke
	Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure	Length of Test 3 hrs Tubing Pressure(shut-in) 1114 SI	Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST	Gravity of Canderieate Choke Size
1.	GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.)	Length of Test 3 hrs Tubing Pressure(shut-in) 1114 SI	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST OIL CONSERVA	Choke Size 3/4" Pos. Choke
	Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN	Length of Test 3 hrs Tubing Pressure(Shut-in) 1114 SI	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 SI OIL CONSERVA	Choke Size 3/4" Pos. Choke ATION COMMISSION
	GAS WELL Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and	Length of Test 3 hrs Tubing Pressure (Shut-in) 1114 SI CE regulations of the Oil Conservation with and that the information given	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 SI OIL CONSERVA	Choke Size 3/4" Pos. Choke ATION COMMISSION
	GAS WELL Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and	Length of Test 3 hrs Tubing Pressure(Shut-in) 1114 SI	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 SI OIL CONSERVA	Choke Size 3/4" Pos. Choke ATION COMMISSION
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	GAS WELL Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and	Length of Test 3 hrs Tubing Pressure (Shut-in) 1114 SI CE regulations of the Oil Conservation with and that the information given	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST OIL CONSERVA APPROVED Original Signed BY SUPERVISOR I	Choke Size 3/4" Pos. Choke ATION COMMISSION 1 4077 19
	GAS WELL Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and	Length of Test 3 hrs Tubing Pressure (Shut-in) 1114 SI CE regulations of the Oil Conservation with and that the information given	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST OIL CONSERVA APPROVED Original Signed SUPERVISOR ITILE This form is to be filed in	Gravity of Conderinate Choke Size 3/4" Pos. Choke ATION COMMISSION 14073 19 DIST. #3 compliance with RULE 1104.
	GAS WELL Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and	Length of Test 3 hrs Tubing Pressure (Shut-in) 1114 SI CE regulations of the Oil Conservation with and that the information given	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST OIL CONSERVA APPROVED Original Signed SUPERVISOR I	Gravity of Condensate Choke Size 3/4" Pos. Choke ATION COMMISSION 19 OIST. #3 compliance with RULE 1104. wable for a newly drilled or deepened
	GAS WELL Actual Prod. Test-MCF/D 3893 AOF Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been compiled above is true and complete to the	Length of Test 3 hrs Tubing Pressure (Shut-in) 1114 SI CE regulations of the Oil Conservation with and that the information given	Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) 1115 ST OIL CONSERVA APPROVED Original Signed SUPERVISOR I	Choke Size 3/4" Pos. Choke ATION COMMISSION 1 4 10 7 3 19 DIST. #3 compliance with RULE 1104. wable for a newly drilled or deepened anied by a tabulation of the deviation

above is true and complete to the best of my knowledge and belief.					
Jun & Jecoba					
/Jim L. Jacobs (Signature)					
// Agent					
(Title)					
7-12-78					
(Date)					

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.