## ызткинотюм NEW MEXICO OIL CONSCRVATION COMMISSION ... Dem C-104 SARTA FU REQUEST FOR ALLOWABLE Superredes Old C-104 and C-110 FILE Effective 1-1-65 u.s.G.5 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRAN-PORTER OPERATOR API :30-039-21682 PRORATION OFFICE Chalalo EL PASO NATURAL GAS CO. Address BOX 289, FARMINGTON, NEW MEXICO Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas CIL Change In Ownership Casinghead Gas Condensate If change of ownership give name and address of previous I. DESCRIPTION OF WELL AND LEASE Well No.; Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee SAN JUAN 28-6 UNIT SF 080430 124 BLANCO MESA VERDE Location : 1520 S Line and \_\_\_ 790 Unit Letter 28N 6W Township Range , NMPM, Rio Arriba I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | or Condensate | A Address (Give address to which approved copy of this form is to be sent) BOX 289, FARMINGTON, NEW MEXICO Address (Give address to which approved copy of this form is to be sent) EL PASO NATURAL GAS CO. Name of Authorized Transporter of Castinghead Gas or Dry Gas 📆 BOX 289, FARMINGTON, NEW MEXICO EL PASO NATURAL GAS CO Sec. Twp. F.ge. If well produces oil or liquids, give location of tanks. 28N 61 If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Deepen Plug Back Same Res'v. Diff. Res'v. Gas Well New Well Workover Oil Well Designate Type of Completion -(X)Total Depth Date Compl. Ready to Prod. 6291' <u> 10/1/78</u> /2/79 6306**'** Top 🏟/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., 5306' Perforations 5306,5312,5390,5396,5402,5408,5414,5420,5426,5575,5579,5583, 5587w/1SPZ. 5828,5834,5840,5846,5860,5866,5872,5878,5896,5902,5908,5914 Depth Casing Sho 63061 DEPTH SET SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 13 3/4" 9 5/8" 203' 224 cf 7'' 3955**'** 8 3/4" <u>301 cf</u> 4 1/2" liner 6 1/4" 3801-63061 432 cf 2 3/8" 6123! tubing (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Casing Pressure Choke Size Tubing Pressure Length of Test - MC Water - Bble. Oil-Bbls. Actual Pred, During Test JAN 24 GAS WELL vily of Sondeneate Actual Prod. Tost-MCF/D Length of Test Bbls. Condensate/MMCF L: Casing Pressure (Shut-in) Tubing Pressure ( Shut-in ) Testing Method (pitot, back pr.) 797 OIL CONSERVATION COMMISSION . CERTIFICATE OF COMPLIANCE VED JAN 26 1079 Original Signed by A. APPROVED R. Kendrick 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. BY SUPERVISOR DIST. 餐 TITLE .. This form is to be filed in compliance with RULE 1104. Luces If this is a request for allowable for a nawly drilled or despensed well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. Drilling Clerk All sections of this form must be filled out completely for silow-sble on new and recompleted wells.

(Title)

(Date)

1/15/79

SP7

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.