

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

API 30-039-21685

Operator El Paso Natural Gas Company	
Address P.O. Box 289, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain)	

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 28-6 Unit	Well No. 15A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee Federal	Lease No. NM 05493
Location				
Unit Letter <u>P</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>East</u>				
Line of Section <u>10</u> Township <u>28N</u> Range <u>6W</u> , NMPLM, <u>Rio Arriba</u> County				

I. 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	P.O. Box 289, Farmington, New Mexico 87401				
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	P.O. Box 289, Farmington, New Mexico 87401				
If well produces oil or liquids, give location of tanks.	Unit <u>P</u>	Sec. <u>10</u>	Twp. <u>28N</u>	Rge. <u>6W</u>	Is gas actually connected? ☐ When

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 11-25-78	Date Compl. Ready to Prod. 1-16-79	Total Depth 5978'		P.B.T.D. 5963'				
Elevations (DF, RKB, RT, GR, etc.) 6464' GL	Name of Producing Formation MV	Top Oil/Gas Pay 5089'		Tubing Depth 5912'				
Perforations 5089, 5100, 5106, 5116, 5122, 5140, 5148, 5163, 5168, 5174, 5341, 5346, 5460, 5473, 5477 w/1 SPZ. 5519, 5522, 5529, 5532, 5541, 5545, 5549, 5553, 5577, 5585, 5589, 5609, 5631, 5636, 5646, 5674, 5691, 5788, 5883, 5925 w/1 SPZ.		Depth Casing Shoe 5978'						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
13 3/4	9 5/8"	224'		224 cf				
8 3/4	7"	3706'		265 cf				
6 1/4	4 1/2" liner	3538-5978'		425 cf				
	2 3/8"	5912'		Tubing				

III. 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	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 953	Casing Pressure (Shut-in) 952	Choke Size

IV. 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.

D. G. Buico
(Signature)

Drilling Clerk
(Title)

2-1-79

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 7 1979
Original Signed by A. R. Kendrick
BY SUPERVISOR
TITLE

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.