

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REGISTRATION	
LEASE	
FILE	
USE	
CARD OFFICE	
TRANSPORT	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address
P.O. Box 289, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 286 Unit	Well No. 50A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State/Federal/Free	Lease No. SF 080430B
Location Unit Letter <u>E</u> : 1520 Feet From The <u>North</u> Line and 1285' Feet From The <u>West</u> Line of Section <u>19</u> Township <u>28North</u> Range <u>6West</u> , NMPM, Rio Arriba County				

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, NM 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, NM 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. E 19 28N 6W
Is gas actually connected?	When

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

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 7-9-80	Date Compl. Ready to Prod. 2-20-81	Total Depth 6021'	P.B.T.D. 6004'					
Elevations (DF, RKB, RT, GR, etc.) 6629' GL	Name of Producing Formation Mesa Verde	Top XXX Gas Pay 5062'	Tubing Depth 5950'					
5558, 5588, 5601, 5605, 5609, 5626, 5630, 5641, 5651, 5657, 5665, 5685, 5690, 5700, 5705, 5728, 5796, 5829, 5846, 5860, 5900, 5916, 5940, 5990'		5062, 5068, 5074, 5088, 5104, 5110, 5167, 5172, 5177, 5182, 5329, 5335, 5357, 5362, 5395, 5441'	Depth Casing Shoe 6021'					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	228'	224 cf.					
8 3/4"	7"	3743'	311 cf.					
6 1/4"	4 1/2" Liner	3603 6021'	421 cf.					
	2 3/8"	5950'						

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-Bble.	Water-Bble.	Gas-Bble.

GAS WELL

Actual Prod. Test-MCF/D 3322	Length of Test 3 hours	Bble. Condensate/MACF	Gravity of Condensate
Testing Method (Flow, back pr.) CALC. A.O.F.	Tubing Pressure (Shot-in) 750	Casing Pressure (Shot-in)	Choke Size 3/4 variable

CERTIFICATE OF COMPLIANCE

Hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.

Drilling Clerk

March 3, 1981

OIL CONSERVATION DIVISION

APPROVED **MAR 5 1981**, 19BY **Original Signed by FRANK T. CHAVEZ**TITLE **SUPERVISOR DISTRICT #3**

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.