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heperate forms C-10-4 must be filled for each pool in multiply

THEM INDEAN OF A PARTICON CON YOUR OIL CONSERVATION DIVISION DISTRIBUTION P. O. BOX 2088 IAHIA FE SANTA FE, NEW MEXICO 87501 LAND OFFICE REQUEST FOR ALLOWABLE TRANSPORTER GAS AND OFFHATUR AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAUNATION OFFICE El Paso Natural Gas Company 87401 P.O. Box 289, Farmington, NM Freson(s) for filing (Check proper bos) Other (Please explain) \mathbf{x} X New Well Dry Gas 011 Recompletion Costnobeod Gas Condensate Change in Ownership If change of ownership give name and address of previous owner. DESCRIPTION OF WELL AND LEASE ell No. Pool None, Including Formation Kind of Lease Blanco MV San Juan 28-7 Unit State, Federal for Foo 20A Location 1620 East 1680 South Line and Feet From The Feet From The 8 28-N 7 - WRio Arriba Range . INMPM Township Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to P.O. Box 289, Farmington, NM Neme of Authorized Transporter of Oil or Condense El Paso Natural Gas Company P.O. Box 289, Farmington, NM 87401 Authorized Transporter of Casinghead Gas or El Paso Natural Gas Company Twp. is gas actually connected? Sec. Unit If well produces oil or liquids, 28-N 7-W . 8 J If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Hes'v. Diff. Res'v. Deepen Workover Cil Well Ggs Well New Well Plug Beck Designate Type of Completion - (X) X P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded 5957' 5-21-80 5-4-81 5974 Elevations (DF. KAB, KT. GR. etc.) 6622' GL Name of Producing Formation Top Ca/Goz Pay Tubing Depth 5920 ' 4957' MV5524,5527,5533,5536,5542,5545,5548,5558,5561,5578,5583,5587, 5608,5613,5634,5653,5686,5694,5720,5745,5836,5908,5928'4957, 4968,4975,5000,5009,5016,5031,5063,5075,5082,5216,5302,5327 Depth Casing Shoe 5974**'** 5338 5346 5380 CASING & TUBING SIZE HOLE SIZE DEPTH SET SACKS CEMENT 224 cf. 232' 280 cf. 3635 **'** 3/4" 3495-5974**'** 430 cf. 6 1/4" 4 1/2" 2 3/8" 5905 (Test must be after recovery of total volume of load all and must be equal to or exceed top allowable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE CIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Casing Pressure Chole-Site Tubing Preseure Length of Test Con-MCF Actual Prod. During Tool Oil-Bble. 480' W/1 SPZ. MAY 1 8 1980 GAS WELL OIL directly of Chapmage Bbie. Condensote/MMCF Length of Teet Actual Fred. Tool-MCF/D DIST 3 hours 69,416 Cusing Freesure (fatt-in) Chake Size Tubing Piesswe (Shut-in) Testing hielhod (puot, back pr.) 719 CALC. A..O.F. OIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE MAY 21 1980 hereby certify that the rules and regulations of the Oil Conservation Original Signed by FRANK T. CHAVEZ Division have been complied with and that the information given above to true and complete to the best of my knowledge and beitef. SUPERVISOR DISTRICT # 9 TITLE _ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despe well, this form must be accompanied by a tabulation of the deviation tests taken on the wall in accordance with NULE 111. All sections of this form must be filled not completely for allowable on new and recompleted wells. Drilling Clerk Fill out only Sections 1, II. III, and VI for changes of owner, well name or number, or transporter, or other such thange of condition.

May 11, 1981