

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE OF FILING	
FILE	
DATE	
LAND OFFICE	
TRANSPORTER	
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

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 28-5 Unit	Well No. 17A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF 079519A
Location Unit Letter P	980	Feet From The South	Line and 850	Feet From The East
Line of Section 20	Township 28-N	Range 5-W	Rio Arriba County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 289, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 289, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 20	Twp. 28N	Rge. 5W	Is gas actually connected? When

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

IV. 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 11-21-80	Date Compl. Ready to Prod. 3-10-81	Total Depth 6231'	P.B.T.D. 6212'					
Elevations (DF, RAD, RT, CR, etc.) 6739' GL	Name of Producing Formation Mesa Verde	Top XX/Gas Pay 5796'	Tubing Depth 6161'					
5796, 5801, 5806, 5811, 5816, 5859, 5869, 5874, 5884, 5894, 5899, 5904, 5914, 5977, 6046, 6060, 6114, 6203' 5274, 5285, 5374, 5380, 5385, 5403, 5407, 5412, 5524, 5578, 5608, 5644, 5660, 5737, 5743' W/1 SPZ.								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	241'	224 cf.					
8 3/4"	7"	3904'	310 cf.					
6 1/4"	4 1/2"	3802-6231'	427 cf.					
	2 3/8"	6161'						

V. 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)

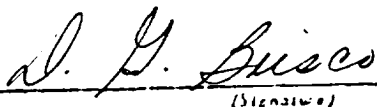
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 527	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (split, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
	600	990	

VI. CERTIFICATE OF COMPLIANCE

I 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

(Title)

March 13, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED **MAR 26 1981**

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

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 Form C-104 must be filed for each pool in multiply