

OIL CONSERVATION DIVISION

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
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STATE	
FED.	
U.S. G.O.	
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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
San Juan 28-7 Unit	231	Basin Dakota	State, Federal or Fee	SF 078417
Location				
Unit Letter	K	1915 Feet From The	South Line and	1930 Feet From The
				West
Line of Section	16	Township	28N	Range 7W, 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.
	K	16
		Twp.
		28N
		Rge.
		7W
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 Resrv.	Diff. Resrv.
	K	16	28N	7W				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-5-80	3-30-80	7414'	7404'					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6228' GL	Dakota	7184'	7362'					
7184, 7194, 7203, 7211, 7218, 7308, 7316, 7338, 7347, 7360, 7368, 7376			Depth Casing Shoe					
			7414'					
			7384' W/I SPZ.					

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	244'	224 cf.
8 3/4"	7"	3305'	304 cf.
6 1/4"	4 1/2"	7414'	630 cf.
	1 1/2"	7362'	

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-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF
393		
Testing Method (flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)
	750	2600

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.
(Signature)Drilling Clerk
(Title)April 9, 1981
(Date)

OIL CONSERVATION DIVISION

APR 21 1981

APPROVED _____, 19____

BY 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 production
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-
able 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 O-104 must be filed for each pool in multiply
completed wells.