

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                  |  |
|------------------|--|
| NAME OF OPERATOR |  |
| ADDRESS          |  |
| CITY             |  |
| STATE            |  |
| ZIP              |  |
| LAND OFFICE      |  |
| TRANSPORTER      |  |
| OPERATOR         |  |
| LAND OFFICE      |  |
| OPERATOR         |  |

El Paso Natural Gas Company

Address

P.O. Box 289, Farmington, NM 87401

Reason(s) for filing (Check proper box)

|                     |                                     |                           |                          |
|---------------------|-------------------------------------|---------------------------|--------------------------|
| New Well            | <input checked="" type="checkbox"/> | Change in Transporter of: |                          |
| Recompletion        | <input type="checkbox"/>            | Oil                       | <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/>            | Casinghead Gas            | <input type="checkbox"/> |
|                     |                                     | Dry Gas                   | <input type="checkbox"/> |
|                     |                                     | Condensate                | <input type="checkbox"/> |

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

|                 |                                |          |               |                                |                   |               |                         |    |           |         |
|-----------------|--------------------------------|----------|---------------|--------------------------------|-------------------|---------------|-------------------------|----|-----------|---------|
| Lease Name      | San Juan <sup>2</sup> 8-5 Unit | Well No. | 57M           | Pool Name, including Formation | Blanco Mesa Verde | Kind of Lease | State/Federal/Lease Fee | SF | Lease No. | 080516A |
| Location        | F                              | 1590     | North         | 1700                           | West              |               |                         |    |           |         |
| Unit Letter     |                                |          | Feet From The |                                | Line and          |               | Feet From The           |    |           |         |
| Line of Section | 19                             | Township | 28-N          | Range                          | 5-W               | NMPLM,        | Rio Arriba              |    |           | County  |

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                             |                          |               |                                     |                                                                          |                            |      |
|-------------------------------------------------------------|--------------------------|---------------|-------------------------------------|--------------------------------------------------------------------------|----------------------------|------|
| Name of Authorized Transporter of Oil                       | <input type="checkbox"/> | or Condensate | <input type="checkbox"/>            | Address (Give address in 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            | <input type="checkbox"/> | or Dry Gas    | <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |                            |      |
| Northwest Pipeline Corp.                                    |                          |               |                                     | P.O. Box 90, Farmington, NM 87401                                        |                            |      |
| If well produces oil or liquids,<br>give location of tanks. | Unit                     | Sec.          | Twp.                                | Rge.                                                                     | Is gas actually connected? | When |
|                                                             | F                        | 19            | 28-N                                | 5                                                                        |                            |      |

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 nesty. | Diff. nesty. |
|                                                                                                                                                                                                     |                             | X               | X                 |          |        |           |             |              |
| Date Spudded                                                                                                                                                                                        | Date Compl. Ready to Prod.  | Total Depth     | P.B.T.D.          |          |        |           |             |              |
| 4-10-81                                                                                                                                                                                             | 11-12-81                    | 7817'           | 7808'             |          |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)                                                                                                                                                                  | Name of Producing Formation | Top Gas/Gas Pay | Tubing Depth      |          |        |           |             |              |
| 6518' GL                                                                                                                                                                                            | Mesa Verde                  | 5018'           | 5877'             |          |        |           |             |              |
| 534,5537,5540,5549,5552,5554,5556,5558,5562,5564,5605,5619,5629,5643,<br>5648,5660,5671,5729,5769,5797,5880,5888'5018,5028,5078,5106,5115,5134,<br>5146,5154,5340,5395,5400,5409,5414,5419,W/1 SPZ. |                             |                 | Depth Casing Shoe |          |        |           |             |              |
|                                                                                                                                                                                                     |                             |                 | 7817'             |          |        |           |             |              |

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET         | SACKS CEMENT |
|-----------|----------------------|-------------------|--------------|
| 17 1/2"   | 13 3/8"              | 234'              | 324 cf.      |
| 12 1/2"   | 9 5/8"               | 3698'             | 898 cf.      |
| 8 3/4"    | 7"                   | 3587-6157'        | 667 cf.      |
| 6 1/4"    | 4 1/2" 1 1/2"        | 5977'-7817' 5877' | 325 cf.      |

TEST DATA AND REQUEST FOR ALLOWABLE  
ON 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)

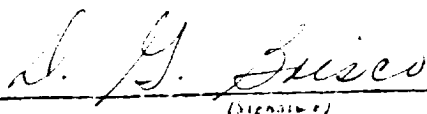
|                                  |                 |                                               |            |
|----------------------------------|-----------------|-----------------------------------------------|------------|
| Date First Flow Oil Run To Tanks | Date of Test    | Producing Method (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/MCF        | Gravity of Condensate |
| 8230                            |                             |                             |                       |
| Testing Method (spot, back pr.) | Tubing Pressure (Start-End) | Casing Pressure (Start-End) | Choke Size            |
| Calc. A.O.F.                    | 570                         | 893                         |                       |

## 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

November 20, 1981

## OIL CONSERVATION DIVISION

NOV 23 1981

APPROVED \_\_\_\_\_, IF  
Original Signed by FRANK T. CHAVEZ  
BY \_\_\_\_\_  
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 2-111.

All portions 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 O-104 must be filed for each pool in multiple