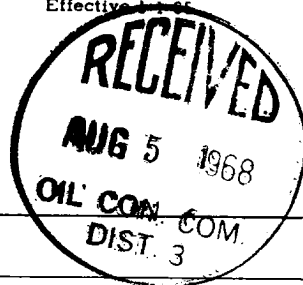


NO. OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		2
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



I.

Operator El Paso Natural Gas Company	
Address Box 990, Farmington, New Mexico - 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
See Back for Details	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hardie D	Well No. 1	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee State	Lease No. 078390-A
Location				
Unit Letter M	1090	Feet From The South Line and 1090	Feet From The West	
Line of Section 12	Township 28N	Range 8W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 990, Farmington, New Mexico - 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)					
El Paso Natural Gas Company	Box 990, Farmington, New Mexico - 87401					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 12	Twp. 28N	Rge. 8W	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.
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
Date Spudded W/O 6-22-68	Date Compl. Ready to Prod. 7-19-68	Total Depth 5190		P.B.T.D. 5183'					
Elevations (DF, RKB, RT, GR, etc.) 6292' GL	Name of Producing Formation Mesa Verde	Top XX /Gas Pay 4532'		Tubing Depth Tubingless Completion					
Perforations 4532-42, 4610-30. 5100 - XX 5120'				Depth Casing Shoe 5186'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
No Record	9 5/8"		169'		125 Sks.				
8 3/4"	7"		4458'		500 Sks.				
6 1/4"	2 7/8"		5186'		150 Sks.				

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 1645	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calculated A.O.F.	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 733	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

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

Original Signed F. H. WOOD

(Signature)

Petroleum Engineer

(Title)

August 1, 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 5, 1968**

BY Original Signed by Emery C. Arnold

TITLE **SUPERVISOR DIST. #5**

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.

6-22-68 Rigged up Dwinell Bros. rig #1, pulled 167 joints 2 3/8" tubing.
 6-23-68 Cleaned out to total depth 5190'.
 6-24-68 Ran 173 joints 2 7/8", 6.4#, J-55 casing (5176') set at 5186' w/150 sacks of cement.
 6-27-68 P.B.T.D. 5183', tested casing to 4000# O. K. Spotted 50 gal. 7 1/2% MSA. Perf.
 5100-20' w/30 shots, frac w/21,000# 20/40 sand, 17,850 gal. water. Max. pr.
 4000#, BDP 1600#, avg. tr. pr. 3800#. I.R. 27 BPM. No ball drop, no flush. ISIP
 sand-off. Used sand bridge on lower perfs and spearheaded 125 gal. 7 1/2% MSA.
 Perf: 4532-42', 4610-30' w/30 SPZ. Frac w/40,000# 40/60 sand, 40,420 gal. water.
 Max. pr. 4000#, BDP pump-in, tr. pr. 3800-3900-4000#. I.R. 26 BPM. Dropped 1 set of
 34 balls, flushed w/1430 gal. water. ISIP 500#, 5 Min. 300#.
 7-5-68 Moved in Drake Well Service, cleaning out sand.
 7-6-68 Cleaning out sand.
 7-7-68 Swabbed well in.
 7-19-68 Date well was tested.