		•	1
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DISTRIBUTION		CONSERVATION COMMISSION	Form C -104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
FILE	<u></u>	AND	Litective 1-1-05
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
LAND OFFICE			
TRANSPORTER OIL /			KEELIVED
OPERATOR 2			NOV 1 9 1968
Operator  RI Paso Natural Ga	a Company		OIL CON. COM.
Address			DIST. 3
Reason(s) for filing (Check proper by	on, New Mexico - 87401	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry G	eas [	
Change in Ownership		ensate	
If change of ownership give name and address of previous owner			
I. DESCRIPTION OF WELL AN	D LEASE		
Lease Name	Well No. Pool Name, Including	Formation Kind of Lea	se Lease No.
Тарр	6 South Elanco	Pictured Cliffs State, Fext	ral or Fee SF 078499
Location	1		
Unit Letter A ; 75	Feet From The North L	ine and 1190 Feet From	The <b>East</b>
Line of Section 22 T	Township <b>26N</b> Range	8W , NMPM,	San Juan County
I. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of C	Oil or Condensate X	Address (Give address to which appr	oved copy of this form is to be sent)
El Paso Natural Ga	as Company	Box 990. Farmingt	ion, New Mexico - 87401
	Casinghead Gas or Dry Gas X	Address (Give address to which appr	oved copy of this form is to be sent)
		Poy COO Perminat	ton, New Mexico - 87401
El Paso Natural Ga	Unit Sec. Twp. Rge.		hen
If we'll produces oil or liquids,		is gas detadify connected:	
give location of tanks.	A 22 28N 8W	<u> </u>	
If this production is commingled	with that from any other lease or pool	, give commingling order number:	
COMPLETION DATA			
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Rest
Designate Type of Comple	tion - (X)	X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-24-68	11-12-68	29641	29541
Elevations (DF, RKB, RT, GR, etc.		Top <b>XX</b> 1/Gas Pay	Tubing Depth
	<b>'</b>	28421	Tubingless Completi
6336 GL Perforations	Pictured Cliffs		Depth Casing Shoe
2846 - 66'			29641
2046 - 00		ID GENEVITING DECORD	
		ND CEMENTING RECORD	21242274
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	108'	95 Sks.
6 3/4"	2 7/8"	29641	155 Sks.
			<u> </u>
	TOP ALLOWANT F	A A A A	11 and must be sound to an overall the second
V. TEST DATA AND REQUEST		after recovery of total volume of load of depth or be for full 24 hours)	il and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
Date First New Oil Run to lanks	Date 01 100t		•
		Contra Pressure	Choke Size
Length of Test	Tubing Pressure	Casing Pressure	Chore Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	1		
<u> </u>			
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1748 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	I any a Liasama ( State-TH )	1053	3/4"
Celculated A.O.F.		1 8 8 354 of	4</td

## 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 by howe

	Carl E. Mannews	
Petroleum Engin	(Signature)	
November 15. 19	68 <sup>(Title)</sup>	

(Date)

This form is to be filed in compliance with RULE 1104.

By Original Signed by Emery C Arnold

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.

OIL CONSERVATION COMMISSION

APPROVED -

NOV 1,9 1968

SUPERVISOR DIST. #5

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.