

NO. OF PERMITS	5
APPROVED	1
FILED	1
RECEIVED	
DATE OF RECEIPT	
TRANSPORTER	OIL / GAS /
OIL BATCH	/
PRODUCTION 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

1.

El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reason(s) for filing (check one or 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

Well Name Warren	Well No. 11	Pool Name, including Formation Aztec Pictured Cliffs	Kind of Lease State (Federal) ☒ Free	Lease No. SF 077123
Location Unit Letter <u>A</u> <u>810</u> Feet From The <u>North</u> Line and <u>810</u> Feet From The <u>East</u>				
Line of Section <u>13</u> Township <u>28N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> 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) PO Box 990, Farmington, NM 87401	
Name of Authorized Transporter of Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>13</u> Twp. <u>28N</u> Rng. <u>9W</u>	Is gas actually connected? ☐ When

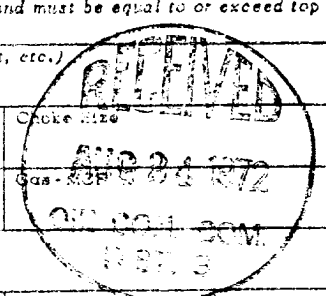
If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☐	Gas Well ☒	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Resrv. ☐	Diff. Resrv. ☐
Date Spudded 6-20-72	Date Compl. Ready to Prod. 8-16-72		Total Depth 2294'		F.B.T.D. 2284'			
Elevations (DF, PKB, RT, CR, etc.) 5814'GL	Name of Producing Formation Pictured Cliffs		Top ☒ Gas Pay 2196'		Tubing Depth tubingless			
Perforations 2196-2222'					Depth Casing Shoe 2294'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 138'		SACKS CEMENT 107 cu. ft.			
6 3/4"	2 7/8"		2294'		355 cu. ft.			
		tubingless						

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top of
oil well)

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



ASPHALTUM TEST - MCF/D 1631	Length of Test 3 hrs.	Bbls. Condensate/MCF	Gravity of Condensate
Tubing Pressure (psig, back pr.) Calc. AOF	Tubing Pressure (psig-in) tubingless	Casing Pressure (psig-in) 663	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.

PH Wood
(Signature)
Petroleum Engineer
(Title)
August 23, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 24 1972, 19
Original Signed by Emery C. Arnold
BY
TITLE SUPERVISOR DIST. #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 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 recompletion wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transportation or other such change of condition.