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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

El Paso Natural Gas Company

Address

PO Box 990, Farmington, NM

Reason(s) for filing (Check proper box)

New Well
Recompletion
Change in Ownership

Change in Transporter of:

Oil Dry Gas
Casinghead Gas Condensate

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jones A	Well No. 8	Pool Name, Including Formation So. Blanco Pictured Cliffs Ext.		Kind of Lease State, Federal or Fee SF	Lease No. 078390
Location Unit Letter G	1850	Feet From The North	Line and 1500	Feet From The East	
Line of Section 15	Township 28N	Range 8W, NMMPM,		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"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM
If well produces oil or liquids, give location of tanks. Unit G Sec. 15 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 X	Gas Well X	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 9-21-72	Date Compl. Ready to Prod. 4-26-73		Total Depth 2568'		P.B.T.D. 2558'			
Elevations (DF, RKB, RT, GR, etc.) 5906'GL	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2388'		Tubing Depth tubingless Depth Casing Shoe 2568'			
Perforations 2388-98', 2420-30', 2442-52', 2492-2502'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4" 6 3/4"	CASING & TUBING SIZE 8 5/8" 2 7/8"		DEPTH SET 135' 2568'		SACKS CEMENT 107 cu.ft. 332 cu.ft.			

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 allowable for this depth or be for full 24 hours)

OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	RECEIVED MAY 4 1973 OIL CON. COM. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D 1205	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, back pr.) Calc. AOF	Tubing Pressure (Shut-in) tubingless	Casing Pressure (Shut-in) .952	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.


(Signature)

Petroleum Engineer

(Title)

May 3, 1973

(Date)

OIL CONSERVATION COMMISSION

MAY 4 1973

APPROVED _____, 19 _____

BY _____ Original Signed by A. R. Kendrick

TITLE _____ PETROLEUM ENGINEER DIST. NO. 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 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.