

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-005-23845

DATE RECEIVED	5
REGISTRATION	1
SEAL	1
FILE	1
U.S. G.S.	1
LAND OFFICE	1
TRANSPORTER	1
OPERATOR	1
PRODUCTION OFFICE	1
COMPLIANCE	1

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico

Person(s) for filing (check proper 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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.				
Lodewick	10E	Basin Dakota	State, Federal or Free	NM02861				
Location								
Unit Letter	K	1675 Feet From The	South Line and	1595 Feet From The				
Line of Section	30	Township	27-N	Range	9-W	NMPM	San Juan	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 289, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 289, Farmington New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	when
	K	30	27-N	9-W		

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-5-80	3-27-80		6992		6974			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top of Gas Pay		Tubing Depth			
6479' GL	Dakota		6722'		6887'			
Perforations					Depth Casing Shoe			
6722, 6725, 6728, 6731, 6734, 6755, 6761, 6780, 6815, 6819, 6823,					6992'			
6826, 6830, 6834, 6838, 6842, TUBING, CASING, AND CEMENTING RECORD					6879, 6903, 6916'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		219'		165 cu. ft.			
7 7/8"	4 1/2"		6992'		382 cu. ft.			
	2 3/8"		6887'					

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 WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	741	1524	

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.

Drilling Clerk

April 8, 1980

OIL CONSERVATION DIVISION

APR 14 1980

APPROVED _____, 19____

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.