

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF EXPLORATION PERMITS	
DISTRIBUTION	
SANTA FE	
FILE	
USE	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
REGISTRATION OFFICE	
Operator	

El Paso Natural Gas Company	
Address Box 289, Farmington, New Mexico 87401	
Reason(s) for filing (check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Russell	Well No. 3A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Free SF	Lease No. 078499
Location				
Unit Letter D ; 910 Feet From The North Line and 1090 Feet From The West				
Line of Section 23 Township 28-North Range 8-West , NMPM, San Juan County				

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 289, 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 289, Farmington, New Mexico 87401				
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 23	Twp. 28-N	Rge. 8-W	Is gas actually connected? When

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 11-21-79	Date Compl. Ready to Prod. 5-7-80		Total Depth 6025'		P.B.T.D. 6007'			
Elevations (DF, RKB, RT, GR, etc.) 6372' GL	Name of Producing Formation Mesa Verde		Top Gas/Gas Pay 4511'		Tubing Depth 5483'			
Perforations 4511, 4559, 4566, 4578, 4582, 4590, 4594, 4604, 4608, 4777, 4784, 4803, 4810, 4846, 4852, 4884, 5004, 5024, 5109, 5114, 5119, 5124, 5130, 5135, 5140, 5150, 5154, 585, 5165, 5168, 5211, 5219, 5278, 5305, 5314, 5369, 5376, 5400, 5429, 5434, 5454, 5459, 5502' W/1 SPZ.					Depth Casing Shoe 6025'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		221'		224 cu. ft.			
8 3/4"	7"		3680'		275 cu. ft.			
6 1/4"	4 1/2"		3524-6029'		436 cu. ft.			
	2 3/8"		5483'					

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-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (shut-in) 600	Casing Pressure (shut-in) 980	Choke Size

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.

A. G. Lisco
(Signature)
Drilling Clerk
(Title)
May 20, 1980
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 11 1980, 12

BY Original Signed by FRYK T. CHAVEZ

TITLE SUPERVISOR DISTRICT

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 to multiply