#### NEW MEXICO OIL CONSERVATION COMMISSION

Form C-122

## MULTI-POINT BACK PRESSURE TEST FOR GAS WELLS

Revised 12-1-55

Poc	ol	9		Format:	ion	Mess Yes	rdo	County_	Nie /	irriba
Ini	tial		Annual_	<del></del>	Sp	ecial		Date of	Test	5-48-58
Con	pany Pactific	Non-Table	ST PIP		Lease_	ion Juan	29-5	Wel	1 No	25-18
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<u>5. l</u>		L	↓							
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#### INSTRUCTIONS

This form is to be used for reporting multi-point back pressure tests on gas wells in the State, except those on which special orders are applicable. Three copies of this form and the back pressure curve shall be filed with the Commission at Box 871, Santa Fe.

The log log paper used for plotting the back pressure curve shall be of at least three inch cycles.

#### NOMENCLATURE

- Q I Actual rate of flow at end of flow period at W. H. working pressure ( $P_{\rm W}$ ). MCF/da. @ 15.025 psia and 60° F.
- $P_c$  72 hour wellhead shut-in casing (or tubing) pressure whichever is greater. psia
- Pw Static wellhead working pressure as determined at the end of flow period. (Casing if flowing thru tubing, tubing if flowing thru casing.) psia
- Pt- Flowing wellhead pressure (tubing if flowing through tubing, casing if flowing through casing.) psia
- Pf Meter pressure, psia.
- hw Differential meter pressure, inches water.
- Fg Gravity correction factor.
- $F_t$  Flowing temperature correction factor.
- Fpv Supercompressability factor.
- n I Slope of back pressure curve.

8 4 3 3 7

Note: If  $P_{\mathbf{W}}$  cannot be taken because of manner of completion or condition of well, then  $P_{\mathbf{W}}$  must be calculated by adding the pressure drop due to friction within the flow string to  $P_{\mathbf{t}}$ .

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1-L. D. Gallowy-2
1-Wayne Smith
2-File

1 Post

# NEW MEXICO OIL CONSERVATION COMMISSION GAS WELL TEST DATA SHEET - - SAN JUAN BASIN

(TO BE USED FOR FRUITLAND, PICTURED CLIFFS, MESAVERDE, & ALL DAKOTA EXCEPT BARKER DOME STORAGE AREA)

Pool	Blanco		Formatio	n Ness.	Aeada	County.	are vi	71.05	
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# NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

4File the original and 4 copies with the appropriate district office)

# CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company or Open	rator El Paso Natura	1 Gas Compa	ny	Lease Sai	Juan 29	-5 Unit
Well No. 25-18	Unit Letter G S	18 <sub>T</sub> 29N	R 5W	PoolBlanco Me	esaverd <b>e</b>	
County Rio Arr	tiba Kind of	Lease (Stat	e, Fed	d. or Patented)	Federal	
If well produces	oil or condensate, giv	e location of	f tanks	s:UnitS	T	R
Authorized Trans	sporter of Oil or Cond	lensate	Paso N	atural Gas Proc	luct <b>s</b>	
Address						
	address to which app				sent)	
Authorized Frans	sporter of Gas I	1 Paso Natu	rai Ga	s Company		
Address box 93	7, Farmington, New Me address to which ap	naco	of this	Date Connec	sted	<del></del>
	ng sold, give reasons					
Reasons for Filir	ng:(Please check prop	er box)	New W	/ell		_( )
	porter of (Check One):				) Conden	sate ( )
Change in Owner	ahin	( ) 01	har			(x)
Remarks:	ship			Give explana	tion belov	v)
January 1, 1960 a	ific Northwest Pipeli nd as a matter of rec change of operator a	ord only, E	l Paso	Natural Gas Co	. is fil:	ing this
	certifies that the Rule n complied with.	es and Regu	lations	Sipilia	servation	n Com-
Executed this the	5th day of Februar	y 19 6	<del></del>		COM.	
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Approved	MAR 2 9 1960	19	Title_	Petroleum Engin	eer	
OIL CONSE Original Signed	RVATION COMMISSI By	ON (	Compai	ny <b>El Paso Natu</b>	ral Gas (	Company
By A. R. KENDR		*	Addres	, Box 997		
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SANTA FE		1		REQUEST FOR ALLOWABLE	Effective 1-1-65
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FILE U.S.G.S.			SANTA FE, NEW MEXICO (Rev. 7-60)							(Rev. 7-60)	
LAND OFFICE	OIL		1 1	ERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
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It gas is not	being sold, g	ave reasons	and also explain its	present on	sposition:						
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**CURRENT RECORDS:** 

#### CHANGE TO:

#### Blanco Mesaverde Pool Continued

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San Juan 28-4 #8-36
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Sea Juan 28-4 Unit #9-32 N-32-28-4
Sea Juan 28-4 Unit #11-31 G-31-28-4
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San Juan 28-6 Unit #1-17 G-17-28-6
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San Juan 29-5 #42 H-32-29-5
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San Juan 29-5 Unit #47-4 L-4-29-5
                                                         San Juan 29-5 Unit #47
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Southern Union Gas Co. (3)
Southern Union Gas Co.
Southern Union Gathering Co.
Oil Conservation Commission, Santa Fe
U.S. Geological Survey

APPROVED E.S. Oberly
El Paso Natural Gas Co.
Effective 11-1-65

#### DISTRIBUTION HEW MEXICO OIL, CONSERVATION CORMISSION 16cm ( -104 SANLA I I REQUEST FOR ALLOWABLE Effective 1-1-65 CHA 1.11.1 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LARD OFFICE OIL. TRANSPORTER GAS OPERATOR PROBATION OF FICE Laciator Northwest Pipeline Corporation Adliess 501 Airport Drive, Farmington, New Mexico 87401 Other (Please explain) Reason(s) for filing I heck proper box New Well Dry Gas Off Recompletion Condensate [X] Castnaheud Gas Change in Ownership Hichenge of ownership give name El Paso Natural Gas Company, PO Box 990, Farmington, New Mexico 87401 and address of previous owner. DESCRIPTION OF WELL AND LEASE Leane l'e Kind of Lease Well Ho. Pool Hame, Including Formation State, Federal or Fee þ70201 SF Blanco Mesa Verde San Juan 29-5 Unit 25 Lecation Feet From The North Line and 1650 East Unit Letter G : 1650 Feet From The Rio Arriba County XL Range 54 , NMPM, Township 29N 13 Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil or Condensate [X] 501 Airport Drive, Farmington, New Mexico 8740 Northwest Pipeline Corporation Audiess (Give address to which approved copy of this form is to be vent) or Dry Gas & None of Authorized Transporter of Casinghead Gas [ ] 501 Airport Drive, Farmington, New Mexico 8740 Northwest Pipeline Corporation Is gas actually connected? Twp. Unit Sec. If well produces oil or liquids, give location of tanks. 18 29N : 5W If this production is commingled with that from any other lease or pool, give commingling order number: Same Res'v. Diff. ites! Plug Back COMPLETION DATA Workover Gas Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spunded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUDING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTHISET CASING & TUBING SIZE HOLE SIZE (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 of the TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Mathe Date of Test Date First New Cil hun To Tanks te Sixo Casing Piese Tubing Pressure Length of Test Jan 2 2 1974 Water - Bbls. Oil - Bbls. Actual Prod. During Test OIL CON. COM DIST. 3 GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Longth of Test Actual Prod. Test-MCF/D Choke Size Cosing Piessure (Shut-in) Tubing Pressure ( bhut-in ) Teating Method (pitct, back pr.) OIL CONSERVATION COMMISSION I. CERTIFICATE OF COMPLIANCE Original Signed by Emery C. Arnold I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief. SUPERVISOR DIST. #3 TITLE \_\_\_ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly diffied or despended well, this form must be accompanied by a tribulation of the days (i.e. toets taken on the well in accordance with RULE 11).

All sections of this form must be filled out completely for allow-able on new and recompleted wells. Fill out only Sections 1. II. III. and VI for thenges of one of 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.

(Signoture)

(liste)

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	DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  IRANSPORTER  GAS	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
7 4 -	OPERATOR  PRORATION OFFICE  Operator  Northwest Pipeline  Address  P.O. Box 90, Farmin  Reason(s) for thing (Check proper pox)	gton, New Mexico 87499	Uther (Please explain)	ON ECS
	New Well  Recompletion  Change in Ownershir  If change of ownership give name	Change in Trimsporter of: OII Pry Ga Casinghead Gas Conder	ıs 📃	1983 3099
	and address of previous owner			
11.	DESCRIPTION OF WELL AND I Lease Name San Juan 29-5 Unit Location Unit Letter G : 165	25 Blanco Mesa V	·	SF-078281
	10		5W Rio A	
11.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of 211  Petro Source Inc. Name of Authorized Transporter of Cas	or Congunsate 🛣	Assess (Give address to which approved 1979 So 700 West, Salt	Lake City, Utah 84104
	Northwest Pipeline	Corporation	P.O. Box 90, Farmington	, New Mexico 87499
	If well produces oil or liquids, give location of tanks.	G 18 29N 5W		
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,  Ci. Weil Gus Weil	give commungling order number:  New Well - Worksver - Daepen	Flog Back - Same Resty. Diff. Resty.
	Designate Type of Completic	n = (X)		
	Date Spudded	Date Compl. Reday to Prod.	Total Eapth	P.B.T.O.
	Elevations (DF, RKB, KT, CR, etc.,	Name of Producing Formation	Top CIVU is Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
٧.	TEST DATA AND REQUEST FOOL WELL		after recovery of total volume of load oil of epth or be for full 24 hours)	and must be equal to or exceed top allow-
	Date First New Cil Aun To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	t, etc.)
	Length of Test	Tubing Pleasure	Casing Fransus	Choke Size
	Actual Prod. During Test	Cti - Bols.	Water-Shie.	Goa-MCF
,	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test		Choke Size
	Testing Mathed (pitot, back pr.)	Tubing Pressure (Shut-in)	Coeing Pressure (Shut-in)	
VI.	CERTIFICATE OF COMPLIANS I hereby certify that the rules and a Commission have been complied above is true and complete to the	regulations of the Oil Conservation with and that the information given a best of my knowledge and belief.	APPROVED	AC 188 5 Charles #
	Donna 1	Brace B		compilance with RULE 1104, rable for a newly drilled or deepened

Donna J. Brace (Indiwe)

Production Clerk
(Title)

December 9, 1982

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 RULZ 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.

#### STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

98. 80 COPIES SEC	****		
DISTRIBUTI	DISTRIBUTION		
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LAND OFFICE			
TRANSPORTER	OIL		
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OPERATOR			
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#### P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83

Separate Forms C-104 must be filed for each pool in multipl

REQUEST FOR ALLOWABLE

PROBATION OFFICE AUTHORIZATION TO THE	AND INSPORT OIL AND NATURA	AL GAS	
Congress Con			
•			
Northwest Pipeline Corporation		· · · · · · · · · · · · · · · · · · ·	
P.O. Box 90, Farmington, New Mexico 8749			
Reason(s) for filing (Check proper box)	Other (Please es	PPER S	
New Well Change in Transporter of:		11) 12	
Recompletion Oil	Dry Gas	101	
Change in Ownership Casinghead Gas	Condensate	M JAN 1 8 1985	. 12. 1
If change of ownership give name and address of previous owner		OIL CO	
II. DESCRIPTION OF WELL AND LEASE		_	
Lease Name   Well No.   Pool Name, Includ	g Formation K	ind of Lease	Lease No.
San Juan 29-5 Unit 25 Blanco Me	a Verde 🔭	A)(a, Federal or F)(a)(X	SF-07828
Location			
Unit Letter G : 1650 Feet From The North	Line and 1650	Feet From The <u>East</u>	
Line of Section 18 Township 29N Range	5W , NMPM, 1	Rio Arriba	
Line of Section 10 15 Manage		TIU AFFIDA	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATI	PAL CAS		
Name of Authorized Transporter of Oil or Condensate		which approved copy of this for	m is to be sent!
UPG, Inc.	1	** ** *	
Name of Authorized Transporter of Casinghead Gas or Dry Gas (Y	Address (Give address to	iberal, Kansas 6790	m is to be sent)
Northwest Pipeline Corporation	į.	armington, New Mexi	
Unit Sec Two Pe			10 0/499
it well produces out or inquide,	W	1	
		. t	
If this production is commingled with that from any other lease or	oi, give commingiing order n	umber:	<u>-</u>
NOTE: Complete Parts IV and V on reverse side if necessary.			
	011,000	UCCOMATION DU VOICE	
VI. CERTIFICATE OF COMPLIANCE		NSERVATION DIVISION	V
I hereby certify that the rules and regulations of the Oil Conservation Division	APPROVED		3
been complied with and that the information given is true and complete to the be	1,	S JAN 1/8	8 1985
my knowledge and belief.	BY	Drank (7	9
	TITLE	SUPERVISOR DI	ISTRACT # 3
Va (1 cm	<b>75.40.40.40.50</b>	e filed in compliance with	
Sinda O. Marques I	)	it for allowable for a newly	
Linda S. Marques(Sienatyle)  Production and Dailling Clark	well, this form must be	e accompanied by a tabulat II in accordance with RUL	ion of the deviatic
Production and Drilling Clerk (Tule)	_ <b>  </b>	is form must be filled out c	
January 9. 1985	- 11	•	channa of our-
(Date)		tions I, II, III, and VI for r transporter, or other such o	

completed wells.

#### STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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DISTRIBUTI	04		
BANTA FE			
FILE		1	
V.1.0.4.	•		
LAND OFFICE			T -
TRANSPORTER	OIL		
, 4420-041 EA	048	T	
OPERATOR			
PROBATION OFF	₩ E		

#### OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page

REQUEST FOR ALLOWABLE

OH FYELD

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

I.	AUTHORIZATION TO	TRANSPOR	T OIL AND NATI	URAL GAS	DIST. 3	NV.
Operator					3.01. 3	
Northwest Pipeline Corp	oration	•				
Address						
P.O. Box 90 - Farmingto	n, New Mexico 8	37499				
Restonts) for tiling (Check proper box)			Other (Pleas	se expiain) .	<del></del>	<del></del>
New Well	Change in Transporter of:					
Recompletion	Cii	Dry Go	•			
Change in Ownership	Casinghead Gas	XX Conder	13010			
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AND L	EASE					
Lease Name	Well No.   Pool Name, Inc.			Kind of Lease		Lease No
San Juan 29-5 Unit	25 Blanco M	esa Verd	e	AWW. Federal KrXIV	ŧ	SF_07828
Location						<del></del>
Unit Letter G: 1650	Feet From The North	Line and	1650	Feet From The	East	•
Line of Section 18 Townsh	ate 29N Ren	nge 5	W , NMPL	. Rio Arri	ha .	<b>C</b>
	** - * * * * * * * * * * * * * * * * *	<u></u>			<del></del>	County
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NA	TURAL GA	S		• •	•
Mancos Corporation	or Condensate (XX	P.	(Give address O. Drawer 13	20 - Farmingto	on, NM 81	7499
Name of Authorized Transporter of Casingn Northwest Pipeline Corp	nead Gas  or Dry Gas ( oration	XX Add	ress (Give address	Farmington, No	y of this form is i	87499 .
If well produces oil or liquids, que location of tanks.	G 18 29N	5W 1 0	as actually connect	ed7 When		
If this production is commingled with th	at from any other lease or	r pool, give	communating order	r number		
NOTE: Complete Parts IV and V on						
VI. CERTIFICATE OF COMPLIANCE			OIL C	ONSERVATION [	ANDION .	iooc
I hereby certify that the rules and regulations of	f the Oil Concention Divisio	- have   4 -		_	IANAU	1986
been complied with and that the information given my knowledge and belief.	en is true and complete to the	best of	PROVED	Srank)	Zava /	19
,7		Τ1	TLE	Sur	ERVISOR DISTOR	T 第 <b>9</b>
(10000001)		I	This form is to	he West on the		
	100	<b>D</b>		be filed in complisions for allowable for		
Carrie Harmon Gianaiwa, Production & Drilling C		we tes	ii, this form must	be accompanied by	a tabularios of	/ the devices
January 7, 1986			All sections of e on new and rec	this form must be fill completed wells.	led out comple	tely for allo-
(Data)		-	Fill out only 3 I name or number,	ections I. II. III. ar, or Unanaporter, or oth	er such change	ges of owner of conditie

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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DISTRIBUTE	O M		1			
SAMTA PE	1					
FILE	1					
V.S.G.3.						
LANG OFFICE						
TRANSPORTER	OIL					
	GAS					
OPERATOR						
PROBATION OF						

# OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Fill out only Sections I. II. III, and VI for changes of owns well name or number, or transporter, or other such change of conditic

completed wells.

Separate Forms C-104 must be filed for each pool in multip

REQUEST F	OR ALLOWABLE
OPERATOR	AND
AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS
I.	
Northwest Pipeline Corporation	
1	-
P.O. Box 90 - Farmington, New Mexico 8749	
Resson(s) for filing (Check proper box)	Other (Please expiain)
New Well Change in Transporter of:	
	Dry Gaz
Change in Ownership Casinghead Gas	Condensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including	Formation Kind of Lease Lease No.
San Juan 29-5 Unit 25 Blanco Mesa	Verde XXXX, Foderal XXXX SF 078281
Location	
Unit Letter G : 1650 Feet From The North L	ine and 1650 Feet From The East
Line of Section 18 Township 29N Range	5W . NMPM. Rio Arriba Count
Elia di decitori 10 Journal EST Italia	JN NAPA, KIO ATTIDA Caust
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	AT CAS
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Four-Four Inc.	P.O. Box 821 - Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas or Dry Gas 📉	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	P.O. Box 90 - Farmington, NM 87499
Linux See Two Bee	Is gas actually connected? When
If well produces oil or liquids, give location of tanks.  G 1 18 29N 5W	
If this production is commingled with that from any other lease or pool	, give commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
	11
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION 1 1) 1000
Thereby specifically also also also also also also also also	
I hereby certify that the rules and regulations of the Oil Green action Division have been complied with and that the information given is true and samplete to the best of my knowledge and belief	APPROVED , 19
my knowledge and belief.	By Sa. [ ]()
$O_{I_{I}} \circ_{V_{I}}$	SUPERVISOR DISTRICT 3
	TITLE
// A.O. See AB	This form is to be filed in compliance with RULE 1104,
Merries !	If this is a request for allowable for a newly drilled or deepen
my knowledge and belief.  (Signature): 3	well, this form must be accompanied by a tabulation of the deviati
Production & Drilling Clerk	tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for allo
May 28, 1986	able on new and recompleted wells.

### STATE OF NEW MEXICO SERGY AND MINERALS DEPARTMENT

DISTRIBUTE					
ANTA FE					
ILE					
.A.D.A.					
AND OFFICE	AND OFFICE				
MANAPORTER	OIL,				
	GAS				
PERATOR					
MOMATION OF	1				

# OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Revised 10-01-78
Format 08-01-83
Page 10-01-78

Form C-104

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL

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139	JUNO	150).	D'	100

perator						
Northwest Pipeline Corporation	OIL COST. 3					
ddreas	Oi. Dia.					
3539 East 30th - Farmington, NM 87401						
eason(s) for filing (Check proper box)	Other (Please explain)					
New Well Change in Transporter of:	Omer (Flease explain)					
Pagameters	ry Gas					
	ondensate					
	ondenac(e					
change of ownership give name  1 address of previous owner  200 company						
DESCRIPTION OF WELL AND LEASE						
well No. Pool Name, Including F	ormation Kind of Lease					
San Juan 29-5 Unit 25 Blanco Mesa V	Lease No.					
ocation.	erde                  SF 078281					
Unit Letter G : 1650 Feet From The North	1454					
Onti Letter G : 1030 Feet From The NOTTA Lin	ne and 1650 Feet From The East					
Line of Section 18 Township 29N Range	5W NMPM, Rio Arriba County					
DECICALATION						
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS					
	Address (Give address to which approved copy of this form is to be sent)					
Gary Energy Corporation  Ime of Authorized Transporter of Casinghead Gas or Dry Gas X	P.O. Box 159 - Bloomfield, NM 87413  Address (Give address to which approved copy of this form is to be sent)					
time of Authorized Transporter of Casinghead Gas or Dry Gas [X]	Address (Give address to which approved copy of this form is to be seed					
Northwest Pipeline Corporation	1 2620 5-44 2011 1					
well produces oil or liquids, Unit Sec. Twp. Rgs.	14 gas galually connected? When					
re location of tanks. G 1 18 29N 5W	, men					
his production to complete design to the complete state of the com						
his production is commingled with that from any other lease or pool,	give commingling order number:					
TE: Complete Parts IV and V on reverse side if necessary.						
,	u ·					
CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION					
	I)					
reby certify that the rules and regulations of the Oil Conservation Division have	APPROVEDJUN 01 1988					
n complied with and that the information given is true and complete to the best of knowledge and belief.						
	BY Sinh) Charles					
1	TITLE SIDEDUISION AT TOTAL					
// //	SUPERVISION DISTRICT #3					
Carried Harris	This form is to be filed in compliance with RULE 1104.					
(Signature)	If this is a request for allowable for a sentence of the					
Production & Drilling Clerk	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.					
(Title)	All regulars of this for					
May 27, 1988	All sections of this form must be filled out completely for allowable on new and recompleted wells.					
(Date)	Fill out only Sections 1 tf tff and 10 for 1					
. (2411)	the transport of transportation of other such change of condition					
·.	Separate Forms C-104 must be filed for each pool in multiply					

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Factorial 1 29
See Instructions
at Bottom of Page

#### OIL CONSERVATION DIVISION P.O. Box 2088 DISTRICT III Santa Pe, New Mexico 8" 504-2088 DISTRICT III 1000 Rid Artec, NM 87410

000 Rio Brazos Rd., Aztoc, NM 87410	negocor		-	BLE AND A						
·	1011	ANS	PORT OIL	AND NAT	URALG	NOT A	Pi Na	<del></del>		
PHILLIPS PETROLEUM	COMPANY		/							
Address			/						•,	
300 W ARRINGTON, SI	UITE 200, FA	RMIN	GTON, NM	87401	(Please expl	eial .				
Reason(a) for Filing (Check proper box)	, Chang	in Trace	eporter of:	U	At wast who					
Recompletion	Ψ,	D Dry								
Change in Operator LXI	Casinghead Oss	D coo	decembe 🗍							
	orthwest Pip	elin	e Corp.,	3535 E.	30th, 1	armingt	on, NM 8	7401		
I. DESCRIPTION OF WELL	L AND LEASE									
Lease Name	Well N		Name, Includi	-			f Leans Pederal or Fgs	Le	ase No.	
San Juan 29-5 Unit	25		BLANCO	MESAVE	≀D E	XX.	Teorati diyi Xe	_ <del></del>	<del></del>	
Location	. 1650			North	. 1	650 _		East		
Unit Letter	:	Ped	From The	North Line	and	F•	et From The		Line	
Section 18 Towns	Alp 29N	Res	5 W	, NM	PM, Ri	o Arri	ba		County	
II. DESIGNATION OF TRA	NSPURIER OF	OIL A		Address (Cine	edd us 10 w	hich approved	copy of this for	m is to be see	~()	
Gary Energy			(33)	P.O. 1	30x 1	59, Bl	oomfiel	d, NM	8741	
Name of Authorized Transporter of Cus	inghesd Om	or D	by Con [XX]	Address (Give	add ess to w	hich approved	copy of this for	m is to be see	rd)	
Northwest Pipeline Co	orp.	Twy					Itah 841 Attn: C	38-0900	ottor	
If well produces oil or liquids, pive location of tanks.	Unik Sec.	1,00	, i v&r	is gas actually	JUNEAU PART	] ""	- ACCII: C	Jalie F	orre1	
this production is commingled with the	at from any other lease	or pool,	give comming	ling order numb	er:					
V. COMPLETION DATA						·	r =		<b>N</b>	
Designate Type of Completion	n - <i>(</i> 20 t	Vell	Cas Well	New Well	Workover	Deepea	Prug Back	Same Res'v	Diff Reiv	
Date Spudded	Date Compl. Read	y to Prod		Total Depts		J	PATA.		•	
·     •										
Servicions (DF, RKB, RT, GR, etc.)  Name of Producing Formation references		Top Oil/Gas P	Top Oil/Gas Pay			Tubing Depth				
		1			Depth Cusing Shoe					
1410							<u> </u>			
				CEMENTIN				1040 0514		
HOLE SIZE	CASING I	TUBIN	G SIZE	<del> </del>	DEPTH SET	<u> </u>	<u>s</u>	ACKS CEM	ENI	
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V. TEST DATA AND REQUI	EST FOR ALLO r recovery of total volu	WABI.	Æ od oil and own	e ha amuel en ar	ercent ton al	Imable for th	is depth or be f	er full 24 kou	ez.)	
OIL WELL, Test must be after Dute First New Oil Rive To Tank	Date of Test	9 8	DE DE BAS MES	Producing Me	trod (Flow, )	nonp, gas lift,	ec)			
							Tolin B	CE	155	
(Tex.	Public Process			Caring freeze	<b>79</b>		This	i iy is i	1 1 15m	
Actual Prod. During Test	Oil - Bbls.			Water - Bola.			CAL MICE	DD A1	1001	
Actual Front Frank 1	J			l				PR 01	1331,	
GAS WELL		<del></del>					OIL	CON	DIV.	
Actual Froil Test - MCF/D	Leagth of Test		<del></del>	Bola Cooden	Bols. Condensate/MMCF			Gravity of Condensate		
	Tubing Pressure (	<b>5.7. E</b> Y	····	Casing Press.	in (Shirt-In)	;	Choke Size			
feeting Method (pitot, back pr.)	I second t tenente (	min-mi		Castal Ligar	frame and		4			
VL OPERATOR CERTIFI	CATE OF CO	MPI I	ANCE	1				50.00		
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to true and complete to the best of m	il micanolis und sen	<b></b>		Date	Αρμιον	eg		Λ		
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L. E. Robinson	Sr. Drlg. &	Prod	l. Engr.	By_	<del></del>			Hethida	- 40	
Prised APR 0 1 1991	or. Dire. d	Tie		Title		our	RVISOR (	AS I MICT	F 3	
WAR O'T 1991	(505) 599-3	412	- 12-							
Th-da		100000	CO. CO.							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for charges of operator, well name or number, transporter, or other such charges.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT B. P.O. Drawer DD, Artesia, NM \$8210

Ener ', Minerals and Natura' esources Department

Revised 1-1-89 See Instructions at Bottom of Page

#### OIL CONSERVATION DIVISION P.O. Box 2088

Saria Fe, New Mexico 8 504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PHILLIPS PETROLEUM COM	PANY							MN4 03907625	5	•	
5525 HWY 64 NBU 3004, 1	FARMING'	TON, N	IEW ME	XIÇO	87401					٠.	
Reason(s) for Filing (Check proper box)	· · · · · · · · · · · · · · · · ·	<b>A</b> !!		4	Oth	es (Piesse exple	in)				
New Well Recognification	Oil	Charge in :	Dry Gas					•			
Change in Operator	Casinghead	Ces 🗌	Condens	<b>L</b>							,
f change of operator give name ad address of previous operator		<del></del>		<del></del>			<del></del>			<del> </del>	•
L DESCRIPTION OF WELL.	AND LEA	SE	Book Ma	- Inches	- Pometica		1 754	of Lesses	1.	ase No.	1
Losse Name San Juan 29-5 Un:		25		-	n <b>g Formation</b> Mesave	erde		Pederal or Pee			
Location	1.65			Ni.	- n + h	1650	2	C	'aat		
Unit LotterG	165	· · · · · · · · · · · · · · · · · · ·	Post Pro	The IV	JI til	1650	F	et From The	ast	Line	
Section 18 Township	29N		Range	5W	, N	MPM, Ric	o Arri	ba	<del></del>	County	]
II. DESIGNATION OF TRAN	SPORTE	R OF OI	L AND	NATU	RAL GAS						_
Name of Authorized Transporter of Oil		or Condea		X	Address (Giv			<i>copy of this form</i> rmington,			
Meridian Oil Transporter Name of Authorized Transporter of Casing			or Dry C		Address (Giv	e address to wh	ich approved	copy of this form	is to be se	nt)	
Williams Field Serv	ices							Lake Cit			1
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Тор	Kår	is gas scome	y consected?	l was	ALLI.	Claii	e rocci	<b>בו</b>
this production is commission with that i	from any other	et Jerre ot 1	pool, give	commingi	ing order numi	ber:					•
V. COMPLETION DATA		Oi Well	Ta	s Well	New Well	Workover	Deepea	Plug Back Sar	me Res'v	Diff Res'v	]
Designate Type of Completion		j	<u>j                                    </u>		Total Depta	<u>i</u>	<u> </u>	P.B.T.D.		<u> </u>	•
Data Spudded	Date Comp	i. Keny io	PIOE		102242			P.B. 1-D.			
Elevations (DF, RKB, RT, GR, etc.)	Devetions (DF, RKS, RY, GR, etc.) Name of Froducing Formation		lop Cilities	iop Circus Pay			Tubing Depth				
Milantian	1	<del>,</del>	<del></del>	<del>, , , , , , , , , , , , , , , , , , , </del>	<u> </u>			Depth Casing S	bos		
		INNIA	C4 CD	- AND	CEL CELTIT	NC BECOR	<u> </u>	<u> </u>		,	
HOLE SIZE		UBLING, UT & DNE			LEMENT	NG RECOR	<u>۔                                     </u>	SAC	KS CEM	ENT	1
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	<del> </del>				ļ						1
V. TEST DATA AND REQUES	T FOD A	HAW	DIF		I					·····	J
OIL WELL (Test must be ofter to	ccovery of lo	cal volume	of load o	l and must	be equal to or	exceed top allo	mable for th	is depth or be for j	full 24 hou	es.)	<b>1</b>
Data First New Oil Rua To Tank	Date of Tes	2			Producing M	ethod (Flow, pu	नक्, ह्य ध्री,	etc.)	<b>7</b>		
Length of Test	Tubing Pres				Casing Press	TILE .		Chotal D	56	IVE	
	Oil - Bbls.				Water - Bbla			Gas- MCF			世
Actual Prod. During Test	Ou - Bonk								JUN	4 1991	]
GAS WELL								OIL	. CO	N. DIV	r <b>-</b> 1
Acoust Frod Test - MCF/D	Length of	cal			Bbls. Conde			Gravity of Con	2013	Г. Э	
Testing Method (pitot, back pr.)	Tubing Pre	eenus (2pm	i-m)		Casing Press	ure (Stafia)		Choke Size	<del>-</del>		1
TO THE OWNER OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER OW	ATTO	COLE	T TAN	CE.	<del>-</del>						J
VI. OPERATOR CERTIFIC  I hereby certify that the rules and regul	ations of the	Oil Conser	vation	CE		OIL COM	ISERV	ATION D	IVISIO	ON	
Division have been complied with and is true and complete to the best of my	that the infor	rmatice giv	es above			  -    -    -    -    -    -    -    -		0 4 1991			
JEK.	4		-		Date	e Approve		A			-
7-00		-			By_	7	دىن	Chang			_
L. E. Robinson	Sr. Dr	1g. &	Prod	.Engr.	11	E 511	PERWIR	OR DISTRIC	T #3		•
Printed Name 5-30-91	(505)	599-3	412		Title						-
Date		Tek	ephone N	0.							_

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
   Separate Form C-104 must be filed for each pool in multiply completed wells.