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SANTA FE	NE.	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWARIES Supersedes Old C-104 an			1 C-104 and C-1		
FILE /		REQUEST FOR ALLOWABLE			Effective 1-1-6		
U.S.G.S.	AUTUODIT	ATION TO TO	DIAME OF ALLE				
LAND OFFICE	AUTHORIZ	ATION TO TRA	INSPORT OIL AND	NATURAL GAS			
<u></u>	 						
TRANSPORTER OIL /	 	**************************************					
GAS /							
OPERATOR 3							
PRORATION OFFICE	<u></u>						
Operator Delication Delication	li Componer	-don			,		
	peline Corporat						
Address		N N '	07/01				
P. O. Box 90		on, New Mexi					
Reason(s) for filing (Check proper			Other (Pleas	e explain)			
New Well	Change in Tra	nsporter of:					
Recompletion	OII	Dry Go	ıs 🔲				
Change in Ownership	Casinghead Go	Conder	nsate				
If change of ownership give nat and address of previous owner				<u></u>			
. DESCRIPTION OF WELL A	ND LEASE	l Name, including F	ormation	Kind of Lease		Lease No.	
Lease Name	1 1			State, XXXXXXXXX	¢ee	E-289-36	
San Juan 29-6	25A B	lanco Mesa V	erde	Sidie, A AXAGAAA	nan-	JE-207-30	
Location	- 4	_	1150		0 .1		
Unit Letter 0	1460 Feet From Th	e East Lir	ne and 1150	Feet From The _	South		
Line of Section 32	Township 29N	Range	6W , NMPA	, Rio Ar	riba	County	
I. DESIGNATION OF TRANSF	ORTER OF OIL AN	D NATURAL GA	Address (Give address	to which approved o	ony of this form is t	o be sent)	
Name of Authorized Transporter of							
	lpeline Corporat		501 Airport Dr Address (Give address		ngton, New M		
Name of Authorized Transporter of							
Northwest P:	ipeline Corporat		501 Airport Dr		ngton, New M	exico	
If well produces oil or liquids,	Unit Sec.	Twp. R.ge.	Is gas actually connec	ed? When			
give location of tanks.		1	No				
If this production is commingle	d with that from any ot	her lease or pool,	give commingling orde	r number:			
COMPLETION DATA							
	Oil We	ell Gas Well	New Well Workover	Deepen Pl	ug Back Same Res	stv. Diff. Restv	
Designate Type of Comp	letion $-(X)$	X	1 X	1			
Date Spudded	Date Compl. Ready	to Prod.	Total Depth	P.	B.T.D.		
8-17-75	9-1	175	6012'		5967'		
Elevations (DF, RKB, RT, GR, e.			Top Oil/Gas Pay	T.	bing Depth		
6742' GR		sa Verde	5356'		5926		
Perforations		Ja Verde		1011, 00 VD	pulled Shoe		
	36' w/31; 0.32 <u>"</u>	Holos		DIST.	3 6010'		
J330 E0 J9:	70 W/JI, U.JZ	HC CYCING YN	D CEMENTING RECO		111111		
			DEPTH S	1	SACKS CEN	AENT	
HOLE SIZE		CASING & TUBING SIZE					
13 3/4"	9	9 5/8" 7 "		2'	180		
8 3/4"		 		<u>'</u>	150		
6 1/4"		4 1/2" Liner)'	215		
	2	3/8" Tubing					
. TEST DATA AND REQUES	T FOR ALLOWABLE	(Test must be c	ifter recovery of total vol	ume of load oil and	must be equal to or	exceed top allo	
OIL WELL		able for this d	epth or be for full 24 how		<u> </u>		
Date First New Oil Run To Tank	• • • • • • • • • • • • • • • • • • •	1		Producing Method (Flow, pump, gas lift,		etc.)	
i	9-22-75		Flow				
	Tubing Pressure		Casing Pressure		Choke Size		
Length of Test	Tubing Pressure			1			
Length of Test	Tubing Pressure						
Length of Test Actual Prod. During Test	Oil-Bbls.		Water-Bbis.	G	as • MCF		
			Water - Bbis.	G	38 - MCF		
			Water-Bbls.	G	18 - MCF		
			Water - Bbls.	G	as • MCF		

CV 3235 AOF 9709

VI. CERTIFICATE OF COMPLIANCE

One Pt. Back Pressure

Testing Method (pitot, back pr.)

3 hours

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.

D. H. Maroncelli

Petroleum Engineer (Tule)

October 1, 1975 (Date)

Tubing Pressure (Shut-in) 721 PSIG

833 PSIG 0.75 Variahle OIL CONSERVATION COMMISSION

Choke Size

Casing Pressure (Shut-in)

APPROVEDOC	1 5 1975	, 19
BY OMGERAL	\$60Xin <u>17 / 7</u>	AGMELL, JR.
D1		- AI DOL 8

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.