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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL /
	GAS /
OPERATOR	/
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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

Operator Northwest Pipeline Corporation	
Address P. O. Box 90 Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
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"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-6 Unit	Well No. 15A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, <del>XXXXXXXXXX</del>	Lease No. E289-36
Location Unit Letter <u>C</u> ; <u>1465</u> Feet From The <u>West</u> Line and <u>1040</u> Feet From The <u>North</u> Line of Section <u>2</u> Township <u>29N</u> Range <u>6W</u> , NMPM, <u>Rio Arriba</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corporation	3539 East 30th Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corporation	3539 East 30th Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

If this production is commingled with that from any other lease or pool, give commingling order number: NA

IV. 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 10-28-75	Date Compl. Ready to Prod. 11-10-75		Total Depth 5870'		P.B.T.D. 5830'			
Elevations (DF, RKB, RT, GR, etc.) 6441' GR	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay 5254'		Tubing Depth 5800'			
Perforations 5254, 5260, 5266, 5272, 5572, 5578, 5584, 5590, 5612, 5616, 5622, 5628, 5654, 5660, 5666, 5672, 5676, 5812, 5820 w/1 shot					Depth Casing Shoe 5866'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		222'		180			
8 3/4"	7"		3714'		160			
6 1/4"	4 1/2" liner		Top 3547' - 5866'		215			
	2 3/8"		5800'		---			

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

Date First New Oil Run To Tanks	Date of Test 11-17-75	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 8" MCF
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test-MCF/D CV 1820 AOF 2955	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate DIST 3
Testing Method (pilot, back pr.) One Point Back Press.	Tubing Pressure (Shut-in) 591 PSIG	Casing Pressure (Shut-in) 591 PSIG	Choke Size 48/64

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.

D. H. Maroncelli  
D.H. Maroncelli (Signature)  
Production Engineer  
(Title)

11-24-75

(Date)

OIL CONSERVATION COMMISSION  
APPROVED DEC 1 1975, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DIST. #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.