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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 PO 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 No. |
| Lease Name San Juan 29-6 Unit | Well No. 32A | Pool Name, including Formation Blanco Mesa Verde |
| Kind of Lease XXX, Federal or XXX | | Lease No. NM 012698 |
| Location | | |
| Unit Letter F ; 1560 Feet From The North Line and 1490 Feet From The West | | |
| Line of Section 11 Township 29N Range 6W, NMPM, Rio Arriba County | | |

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|--|--------------------------------|--|------|
| III. 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 Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Northwest Pipeline Corporation | 3539 E. 30th St., Farmington, N.M. 87401 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Northwest Pipeline Corporation | 3539 E. 30th St., Farmington, N.M. 87401 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. |
| | | | Pge. |
| Is gas actually connected? | | When | |

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

| | | | | | | | | | |
|--|--|-------------------------|----------|----------------------|----------|--------|-----------|-------------|--------------|
| IV. COMPLETION DATA | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Designate Type of Completion - (X) | | | X | X | | | | | |
| Date Spudded 9-4-77 | Date Compl. Ready to Prod. 9-22-77 | Total Depth 5810 | | P.B.T.D. 5778 | | | | | |
| Elevations (DE, RNB, RT, GR, etc.) 6526' GR | Name of Producing Formation Blanco Mesa Verde | Top Oil/Gas Pay 5314 | | Tubing Depth 5720 | | | | | |
| Perforations 5314' to 5733', 30 holes | | Depth Casing Shoe | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | | |
| 12 1/4" | 9 5/8" | 190' | | 125 | | | | | |
| 8 3/4" | 7" | 3856' | | 150 | | | | | |
| 6 1/4" | 4 1/2" liner | 3641' to 5808' | | 210 | | | | | |
| | 2 3/8" tbg | 5720' | | -- | | | | | |

| | | | |
|---|-----------------|---|------------|
| V. 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.) | |
| | 9-22-77 | Flow | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |

| | | | |
|--|----------------------------------|----------------------------------|-----------------------|
| GAS WELL | | Bbls. Condensate/MMCF | Gravity of Condensate |
| Actual Prod. Test-MCF/D CV=3346 AOF=6909 | Length of Test 3 hrs | | |
| Testing Method (pilot, back pr.) Back Pr. | Tubing Pressure (shut-in) 533 | Casing Pressure (shut-in) 533 | Choke Size 48/64 |

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| VI. CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION OCT 17 1977 | |
| 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. | | APPROVED _____, 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. | | | |
| Form C-104 must be filed for each well in multiply | | | |
| Production Clerk (Title) | | | |
| Sept. 29, 1977 (Date) | | | |