

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-21453

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El Paso Natural Gas Company

Address
Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change Operator

If change of ownership give name
and address of previous owner Amoco

1. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-4	Well No. 21	Pool Name, Including Formation East Blanco Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. SF079756-
Location Unit Letter <u>K</u> : <u>1715</u> Feet From The <u>South</u> Line and <u>1785</u> Feet From The <u>West</u> Line of Section <u>5</u> Township <u>29-North</u> Range <u>4-West</u> , NMPM, <u>Rio Arriba</u> County				

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) Box 90, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 5
	Twp. 29-N	Rge. 4-W
	Is gas actually connected? When	

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

3. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X						
Date Spudded 9-25-78	Date Compl. Ready to Prod. 7-5-78		Total Depth 6750'		P.B.T.D. 6704'			
Elevations (DF, RKB, RT, CR, etc.) 7491' GL	Name of Producing Formation East Blanco PC		Top Oil/Gas Pay 4208'		Tubing Depth 4431'			
Perforations 4208-4250, 4278-4318, 4362-4378, 4396-4438'					Depth Casing Shoe 6750'			
TUBING, CASING, AND CEMENTING RECORD								
HCLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		275'		330 sk			
8 3/4"	7"		4712'		1040 sk			
6 1/4"	4 1/2" Liner		4485-6750'		300 sk			
	1 1/4"		4431'		tubing			

4. 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-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (spiral, back pr.)	Tubing Pressure (Shut-in) SI 985	Casing Pressure (Shut-in) SI 1069	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.

D. G. Brisco
(Signature)

Drilling Clerk

November 9, 1979

(Title)

(Date)

OIL CONSERVATION DIVISION

NOV 13 1979

APPROVED _____, 10 _____

BY Original Signed by FRANK T. CHAVEZ

SENIOR OIL & GAS 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 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 Form C-104 must be filed for each pool in multiply completed wells.