UNITED STATES SUBMIT DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE.

(See other instructions on reverse side) Form approved. Budget Bureau No. 42-R356.5.

Budget Bureau No. 42-R356.5.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078282

WELL CO	MPLETION	OR RE	ECOM	PLETI	NO	REPORT	ANI	D LO	G *	6. IF INDI	AN, ALL	OTTEE OR TRIBE NAME
1a. TYPE OF WELL	L: OIL WEL	. 🗆 🦫	WELL X	DR	v 🗍	Other		··		7. UNIT AC	GREEMEN	NT NAME
b. TYPE OF COME			WELL UL	Di		Other				San Ju	ıan 2	9-5 Unit
NEW X	WORK DEED		PLUG DACK	DIFF	R. 🗌	Other				8. FARM O		
2. NAME OF OPERAT	OR									San Ju	uan 2	9-5 Unit
Northwest	Pipeline	Corpor	ration							9. WELL N	0.	
3. ADDRESS OF OPER	ATOR	· · · · · · · · · · · · · · · · · · ·								11A		
), Farming											OL, OR WILDCAT
4. LOCATION OF WEL				ordance	with an	y State requi	rement	8)*		_		a Verde
At surface	1050' FNL	. & 815								11. SEC., T OR AR		OR BLOCK AND SURVEY
At top prod. into	erval reported bel	ow	sar	ne								
At total depth			sa <u>r</u>							Sec 19		9N R5W
				14. PEE	MIT NO.		DATE	ISSUED		12. COUNT PARISE	Ħ	13. STATE
					7 0 2 - 4	1				Rio Ar		
15. DATE SPUDDED	16. DATE T.D. RI	EACHED 1		-	_	o prod.) 18	. ELEV			T, GR, ETC.)	4 19.	ELEV. CASINGHEAD
2-4-78	2-11-78			24-78		TIPLE COMPL.		6/1 1 23. INTE	2' GR	ROTARY T		CABLE TOOLS
20. TOTAL DEPTH, MD	E TVD 21. PLUC	, BACK T.D.	., MD & TVI	22.	HOW M		••		LED BY		OOLS	l CABLE TOOLS
6019 1 24. PRODUCING INTER	TAT (8) OF THE	5981'	N TOP P	OTTOM	NAME ()	ות אלת מער) ו			<u>→ </u>	<u>all</u>	15	25. WAS DIRECTIONAL
			NIOF, B	oliom,	MADIE (S	AD AND IVD)					-	SURVEY MADE
Mesa Verde;	5510' - 59	9 68 '							·			no
GR-Neutron,		LUN								, <u>.</u>	27.	WAS WELL CORED
un-neutron,	OUL.											no
28.						ort all string	s set in					
CASING SIZE	WEIGHT, LB./I	FT. DE:	PTH SET			LE SIZE	-	CEN	1ENTING	RECORD		AMOUNT PULLED
9-5/8"	32.3#		219		<u> </u>	2-1/4"			125			5 bbls
	20.0#		393	+		8-3/4"	·		150			
	-						-				<u></u>	
29.	<u> </u>	LINER RE	ECORD				! 	30.		UBING RE	COPD	
SIZE SIZE	TOP (MD)	BOTTOM (CKS CE	MENT	SCREEN (M	(D)	SIZE		DEPTH SET		PACKER SET (MD)
4-1/2"	3764	6017	· · · · · · · · · · · · · · · · · · ·	210			-	2~378	. 1	5952	(20)	one
									_			
31. PERFORATION REC	OED (Interval, siz	e and nun	nber)		7.0	32.	AC	D. SHOT.	FRACT	URE. CEME	NT SQU	UEEZE, ETC.
5510 5540		5782	5874		10	DEPTH IN						MATERIAL USED
5518 5546		5840	5882		16	5510	-596	8	1	500 gal		
5524 5554		5846	5888		42	30 h	oles		1000			& dropped 50
5532 5562		5854	5898		58				balls			0,000 gal pad
5536 5568	5768	5868	5904	59	6 8	-			Frace	d w/ 10	00,00	0# 20/40 sd @
33.*						DUCTION			1½ pp	g in s		
DATE FIRST PRODUCTI	ON PRODU	CTION MET				umping—size	and to	pe of pun	np)	WEI	L STATE	US (Producing or
-			Flo	owing								Shut-in
DATE OF TEST	HOURS TESTED	1	E SIZE	PROD'N TEST 1		OIL-BBL.		GAS-MC	of the last of the	WATER-B		GAS-OIL RATIO
2-24-78	3	0.75				-		CV 34	4 2 7 7 7 7	mis mis		
267 psiq	680 psic	24-но	UR RATE	OILB	BBL.	GAS	-мсғ. F 82	19	WATER	20 m		GRAVITY-API (CORR.)
34. DISPOSITION OF GA			ed, etc.)		······································	1	7	المراها	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Gers with	ESSED	вт
	pipeline						-	.s f\	8 8	19:0	ĺ	÷
The same of the sa												
								/ Other	CON	T3 /		J
36. I hereby certify	that the foregoin	g and atta	ached info	rmation	ie comp	lete and corr	ect as	determin	ed from	all avairable	record	S
) achara	416	Po		Ε	roduction	on C	lork	San Stranger		М	larch 2, 1978
SIGNED	my and	<u> </u>	CC 1/2	TIT	LE _	1 June 11	UII 6	ICIK		DA	TE	ui (11 £, 17/0

or both, pursuant to applicable Federal and/or Late laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or tate laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be

should be listed on this form, see item 35.

Hem 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Hems 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, and interval to be separately produced, showing the additional data pertinent to such interval.

Hem 23: "Nacks Comment": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.) Hem 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Pederal office for specific instructions.

-	d	TRUE VERT. DEPTH	same same same same	
GEOLOGIC MARKERS	TOP	MEAS. DEPTH	5508' 5575' 5834 6019'.	
38. GEOLOG		NAME	Cliff House Menefee Point Lookout	
TS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING PEN, PLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	DESCRIPTION, CONTENTS, ETC.		S.S. It to med gry, silty in part, fn to med gr, interbedded w/ siltstone, It to dk gry carbonaceous shale.	
ROSITY AND CONTE	иоттои			
JUS ZONES: TANT ZONES OF PO: TESTED, CUSHION	ror			
37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; DEFTH INTERVAL FESTED, CUSHION USED, TIME TOOL OPEN, PLOWING	FURMATION			

NO. OF COPIES REC	EIVED	6	
DISTRIBUTIO	ON		
SANTA FE		1	
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
GAS			
OPERATOR			
PRORATION OFFICE			

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DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110
FILE		AND	Effective 1-1-65
U.\$.G.\$.	AUTHORIZATION TO TRA	INSPORT OIL AND NATUR	RAL GAS
LAND OFFICE			
TRANSPORTER OIL			•
GAS /	<u> </u>		
OPERATOR 2			•
PRORATION OFFICE			
Operator			•
Northwest Pipelin	ne Corporation		
Address			
PO Box 90, Farm	ington, New Mexico 8740]		
Reason(s) for filing (Check proper box		Other (Please explain	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Ga		
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name			•
and address of previous owner			
. DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	orgation Kind o	i Lease No.
San Juan 29-5 Un		7.1.21	Federal XXX SF078282
Location	"	07.5	Most
Unit Letter D: 10!	50 Feet From The North Lin	e and 815 Feet	From The West
		F11	Die Assiba
Line of Section 19 To	wnship 29N Range	5W , NMPM,	Rio Arriba County
	TED OF OUR AND MATTIDAL CA	r.	
Name of Authorized Transporter of Other	TER OF OIL AND NATURAL GA	Address (Give address to which	approved copy of this form is to be sent)
Northwest Pipeline Cor		3539 E 30th St., Fa	rmington, New Mexico 87401
Name of Authorized Transporter of Ca			approved copy of this form is to be sent)
Northwest Pipeline Cor	noration	3539 E 30th St., Fa	rmington, New Mexico 87401
Not these Tipe The cor	Unit Sec. Twp. P.ge.	Is gas actually connected?	When
If well produces oil or liquids,	t l l l l l	is que usuan, comocio.	
give location of tanks.	<u>i i i i i i i i i i i i i i i i i i i </u>		
If this production is commingled wi	ith that from any other lease or pool,	give commingling order number	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same Restv. Diff. Restv.
Designate Type of Completi		X ;	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded 2-4-78	2-24-78	6019'	5981 '
		Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.) 6712 GR	Mesa Verde	5510'	5952'
	Tiesa verde	1 00.0	Depth Casing Shoe
Perforations 5510' - 5968'; 30 hole	.e		6017'
5510 - 5966 , 30 Hote		D CEMENTING RECORD	
		DEPTH SET	SACKS CEMENT
12-1/4"	CASING & TUBING SIZE	2191	125
8-3/4"	- 7 11	3934	150
6-1/4"	4-1/2" liner	3764' to 6017	
6-1/4	2-3/8" tbg	5952'	-
		<u> </u>	oad oil and must be equal to or exceed top allow-
. TEST DATA AND REQUEST F	OR ALLUWABLE (1 est must be a able for this di	epsh or be for full 24 hours):	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump	, eas life elegant
	2-24-78	Flow	/OFITHINE
Length of Test	Tubing Pressure	Casing Pressure	/ KEGE Y[])
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	MAR* - M3F1978
1			OIL CON. COM.
1			
GAS WELL			DIST. 3
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
CV 3422 AOF 8239	3 hrs	trace	-
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back pressure	742 psig	821 psig_	0.750"
I. CERTIFICATE OF COMPLIAN			ERVATION COMMISSION
i, Certificate of Complian		1	AND 6 1079
فالمنافية المنافية المنافة المنافق المنافة المنافق الم	regulations of the Oil Conservation	APPROVED	ed by A. R. Kendrick 19
Commission have been complied	with and that the information given	Original Sign	en na m
above is true and complete to th	se best of my knowledge and belief.	BY	
		TITLE SUPERV.	ISOR DIST. #3
2	a 1		led in compliance with RULE 1104.
San	nature)	To able to a compact for	attomable for a newly drilled or deepened
Machine	a C. Niz	It is able from more be a	companied by a tabulation of the Geviation
		tests taken on the well i	n accordance with RULE 111.
	on Clerk	Atl sections of this i	form must be filled out completely for allow-
•	itle)	able on new and recompl	and VI for changes of owner,
March 2		If well name of number, or u	ns I, II, III, and VI for changes of owner, anaporter, or other such change of condition.
(E	Pate)	C-1	to multiply

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40. OF COPIES REC	£14£3	:	_
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TRANSPORTER		_	
The part of the pa		_	
OPERATOR			_
PROPATION OF	-166		_

Production Clerk

December 9, 1982

(Title)

NEW MEXICO DIL CONSERVATION COMMISSION

Form C-104

	FILE	H KEGUESI	FUR ALLOWABLE AND		Supersedes Old C-1 Effective 1-1-65	04 and C-11
	U.S.G.S.	AUTHORIZATION TO TR		NATUDAL CAS		
	LAND OFFICE	_		MATORAL GAS		
	TRANSPORTER OIL	-				
	OPERATOR					
1.	PRORATION OFFICE					
	Northwest Pipeline	Corporation				
	Address					
	Reason(s) for filing (Check proper box	ngton, New Mexico 87499	1000000		· · · · · · · · · · · · · · · · · · ·	
	New Woll	Change in Transporter of:	Other (Pleas	ε ετρίαιη)		
	Recompletion	Oil Dry G	115			
	Change in Ownership	Castaghead Gas Conde	ensate X			
	If change of ownership give name and address of previous owner					
	and address of previous owner		-			
11.	DESCRIPTION OF WELL AND	LEASE. (Wen Mo., Pool Name, including i	Commutan	Kina of Lease		
	San Juan 29-5 Unit	11A Blanco Mesa V		XXX Federal ox XX	l l	_ease ::0. 078282
	Location				i	
	Unit Letter U;	050 Feet From The North	ne and 815	Feet From The	lest	
	Line of Section 19 To	wnship 29N Range	5W , SMEN	, Rio Arriba		County
- 57	· BESSONATION OF THANSHOR	OUT OF SAID ALAMED AS O				
44.	Name of Authorized Transporter of Of.	TER OF OIL AND NATURAL G.	Address (Give address	to which approved copy	of this form is to be	sent)
	Petro Source Inc.		1979 So 700 We	est, Salt Lake	City, Utah 8	34104
	Northwest Pipeline		Adaress (Git e adaress			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	P.O. Box 90, I	armington, Ne	w Mexico 8/49	99
	give location of tanks.	D 19 29N 5W				
IV	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling orde	r number:		
	Designate Type of Completion	Ci. Well Gas Well	New Well Workover	Deepen Ding 8	Back Same Restv. 1	Diff. Restv.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		·
	Date byddesd	Ty	Total Day.ii	P.B.T		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Grs Pay	Tubin	g Depth	
	Perforations		i	Depth	Casing Shoe	
			O CEMENTING RECOR			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ET	SACKS CEMENT	
						-
				<u> </u>		
ν.	TEST DATA AND REQUEST F	OR ALLOWABLE. (Test must be a	ifter recovery of total volu	me of land all and must	. 34 agral to as success	d 445 all
	OIL WELL Date First New Oil Bun To Tanks		epth or be for full 24 hours)	7 C C C C C C C C C C C C C C C C C C C	
	Date First New Off Han 15 ; date	Dete of Test	Producing Method (Flou	, pump, and		
	Length of Test	Tebing Pressure	Casing Pressure	Alley		
	Actual Prod. During Test	Oti-Bbis.	Water-Ebis.	Gan.	-630	
	Actual Front Paring Foot	0 22.3.		DEC 14	1982	
, 6				OIL CON. C		
	GAS WELL Actual Prod. Test-MCF/D	Length of Teat	Bbls. Condensate/MMC	DIST. Grevit		
					7	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	-in) Choke	Size	
WI	CERTIFICATE OF COMPLIAN	Cr I	\$ 01. 6	SOUSED VATION	8011111001011	
71.	CENTIFICATE OF COMPLIAN	<u>-</u>		CONSERVATION	2 CMMISSION	
	I hereby certify that the rules and r	regulations of the Oil Conservation with and that the information given	APPROVED		, 19_	
	Commission have been complied washove is true and complete to the	best of my knowledge and belief.	BY	Korles L	Wolson.	
	^		TITLE DEPU	TY OIL & GAS INSPE	CTOR, DIST. #3	
	Manage h	R. P	This form is to	be filed in compilar	nce with RULE 110	04.
	Donna I Proceed in	Oppose D	If this is a requirement well this form must	nest for allowable for the accompanied by	r a newly drilled or a tabulation of the	deepened

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.

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTE	0 M		
SANTA PE	SANTA PE		\vdash
FILE		T	
U.S.G.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAB		
OPERATOR			
PRORATION OF	HCK		

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

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

REQUEST FOR ALLOWARIE

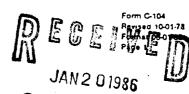
OPERATOR	AND			
AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL GAS			
A.				
Northwest Pipeline Corporation				
Address				
P.O. Box 90, Farmington, New Mexico 87499	megelven			
Reeson(s) for filing (Check proper box)	Other (Please explana)			
New Well Change in Transporter of:	. 0.1005			
Recompletion OII	JAN 1 8 1985			
Change in Ownership Casinghead Gas	Condensate OII CON. DIV.			
If change of ownership give name	DIST. 3			
and address of previous owner	Dio			
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, includin	. Ledse No.			
San Juan 29-5 Unit 11A Blanco Mesa	Verde SK Federal SYXX SF 078282			
Location				
Unit Letter D : 1050 Feet From The North Line and 815 Feet From The West				
Line of Section 19 Township 29N Range 5W NMPM, Rio Arriba County				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AL GAS			
Name of Authorized Transporter of Oil or Condensate (A) UPG, Inc.	P.O. Box 66, Liberal, Kansas 67901			
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, New Mexico 87499			
If well produces off or liquids, Unit Sec. Twp. Rgs. give location of tanks. D 179 29N 5W	is gas actually connected?			
If this production is commingled with that from any other lease or po	ol, give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.				
	11			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of				
my knowledge and belief.	" BY Trank			
	Y The state of the			
$\sqrt{1 - 2}$	TITLE SUPERVISOR DISTRICT 3			
Tundo S. Marques 🗲	This form is to be filed in compliance with RULE 1104.			
Linda S. Marques (Signature)	If this is a request for allowable for a newly drilled or deepens			
Production and Drilling Clerk	well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 111.			
(Tule) January 7, 1985	All sections of this form must be filled out completely for allow able on new and recompleted wells.			
(Date)	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

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BANTA FE	Γ	
FILE		
V.1.0.4.	\mathbf{L}	
LAND OFFICE		
THAMPPORTER		
DAS		
OPERATOR		
PROBATION OFFICE	П	

P. O. BOX 2088

SANTA FE. NEW MEXICO 87501



REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TO

OIL CON. DIV.

1.	TRANSPORT OIL AND	NATURAL GAS	-
Operator			
Northwest Pipeline Corporation	•		•
Address			
P.O. Box 90 - Farmington, New Mexico	87499		
Rossonis) for filing (Check proper box)		(Please expiain) .	
New Well Change in Transporter o		tree capitality	
Recompletion Oil	Dry Cas		
Change in Ownership Casinghead Gas	XX Condensate		
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Leane Name Well No. Pool Name, In	·	Kind of Lease	Lease No.
	nco Mesa Verde	Kinch, Federal MARKEN	SF . 07828
Location			
Unit Latter D : 1050 Feet From The NOT	th Line and 815	Feet From The	West
10 - 20N	ru.	.ммрм. Rio Arril	•
III. DESIGNATION OF TRANSPORTER OF OIL AND NA	TURAL GAS		
Name of Authorized Transporter of Off or Condensate	Asarona (Give a	ddress to which approved copy	of this form is to be sent!
Mancos Corporation	P.O. Drawe	er 1320 - Farmingto	n, NM 87499
Name of Authorized Transporter of Casingnead Gas or Dry Gas		ddress to which approved copy	
Northwest Pipeline Corporation	P.O. Box 9	90 - Farmington, Ne	w Mexico 87499 .
If well produces oil or liquids. Unit Sec. Twp.	Rge. Is gas actually a		
give location of lanks. ! D ! 19 ! 29N !	5W	i	•
		· · · · · · · · · · · · · · · · · · ·	
f this production is commingled with that from any other lease		g order number:	· · · · · · · · · · · · · · · · · · ·
NOTE: Complete Parts IV and V on reverse side if necessar	7 y.		

VI. 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 is true and complete to the best of my knowledge and belief.

Carrie Harmon	\mathcal{Z}
Carrie Harmon Gienewe, Production & Drilling Clerk	
January 6, 1986	
(Date)	

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4 111	1 3 1019	. ا نــا - ا	O TIMENT	DIVISION
~		\neg L \cap V	A 4 11 11 VE	1 10/15-11 10

APPROVED	JAN 20 1986
BY	Srank S. (1)
TITLE	SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepenwell, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for alloable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owns well name or number, or transporter, or other such change of conditie Separate Forms C-104 must be flied for each pool in multip completed wells.

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Tille)

(Date)

May 27, 1986

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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

All sections of this form must be filled out completely for allo

Separate Forms C-104 must be filed for eachopool in multip

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

able on new and recompleted wells.

completed wells.

OPERATOR	•	KEGOES! F	OR ALLOWABLE			
PROMATION OFFICE			AND	•	•	-
T	AUTHORIZ	ATION TO TRAN	ISPORT OIL AND	NATURAL GAS		
Cperator				· · · · · · · · · · · · · · · · · · ·		
1 '		•				
Northwest Pipeline Corp	Joration					
ì		. 07400				
P.O. Box 90 - Farmingto	on, New Me	xico 87499				
Resson(s) for filing (Check proper box)			Other	(Please expiain)	 	
New Well	Change in Tr	ansporter of:				
Recompletion	<u></u> □ 011		Dry Gas			
Change in Ownership	Casingh	ead Gas X	Condensate			
			<u></u>			
If Change of ownership give name and address of previous owner						
and sudiess of previous owner		- "				
II. DESCRIPTION OF WELL AND	IFASP					
Lease Name		ol Name, including	Formation	Kind of Lease		Lease N
San Juan 29-5 Unit	111A	Blanco Mesa	Verde	States Federal MrxFe	× SF	1
Location				TAXA AAA	- 31	070202
Unit Letter D : 1050		North	015		l.loo+	
Unit Letter D : 1050	Feet From T	north L	ine and 015	Feet From The	West	
Line of Section 19 Towns	20N	_	EM	D	•	
Line of Section 9 Towns	htp 29N	Range	5W	, NMPM, Rio Arril	<u> </u>	Caun
III DESIGNATION OF TRANSPOR						
Mame of Authorized Transporter of Cil			L GAS	,,		
<u> </u>	J of Cones	nsate (X)	1	ddress to which approved cop		be sent)
Four-Four Inc.			1 P.O. Box	821 - Farmington	, NM 87499	
Name of Authorized Transporter of Casting		or Dry Gas 💢	Address (Give a	ddress to which approved cop	y of this form is to	be sent)
Northwest Pipeline Corp	oration		P.O. Box	90 - Farmington,	NM 87499	
If well produces oil or liquids,		Twp. Rge.	Is gas actually o	connected? When		
give location of tanks.	D 19	29N 5W		!		•
If this production is commingled with t	hat from any of	her lease or pool	give communation	a order number		
	-	-	, give comminging	E order limination		
NOTE: Complete Parts IV and V o	n reverse side	if necessary.				
*** CTP*********************************				III CONCEDIATION	5 0	
VI. CERTIFICATE OF COMPLIANC			1	DIL CONSERVATION I		1006
I hereby certify that the rules and regulations	A. Bon.	varion Division have	APPROVED	_	TOM TA	1300
been complied with and that the information	iven is true and co	mp re to the best of	AFFROV	~ ~~	· `	.9
my knowledge and belief.	4	i di Million .	_{BY}	50 / (())		
	IL COM			- SUPERIOR	Diernian	
· · · · · · · · · · · · · · · · · · ·	10/VID	10 1/1	TITLE		DISTRICT 📑 🕏	<u> </u>
	14 Ca	1986 <u>II</u>	70-6-	V		
Ulive Itan	or tow	、	10	is to be filed in complia		
Dundunting P. D. Gignature	J DIST	UIV	well, this for	a request for allowable for must be accompanied by	or a newly drilled	or deepen
Production & Drilling (ierk 🔥 3	' "	tests taken or	a the well in accordance	with RULE 111.	~= *11(

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

70. 00 COPICS DEC	****		
DISTRIBUTI	ОН		_
SANTA FE			-
FILE			
U.S.G.S.			
LAND OFFICE		-+	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF	HCK		-

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL O

	COSTOR	
O	MANY 2 5 1088	

I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS
Operator	OIL CON. DIV.
Northwest Pipeline Corporation	DIST. 3
3539 East 30th - Farmington, NM 8740]	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	· ·
Recompletion Oil	bry Gas
Change in Ownership Casinghead Gas	ondensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
well No. Pool Name, including P	Legae No.
San Juan 29-5 Unit 11A Blanco Mesa	/erde XXXXX Federal XXXXXX SF 078282
Unit Letter D : 1050 Feet From The North Lin	ne and 815 Feet From The West
Line of Section 19 Township 29N Range	5W , NMPM, Rio Arriba Saussa
	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	LGAS
Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Gary Energy Corporation	P.O. Box 159 - Bloomfield, NM 87413
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	3539 East 30th - Farmington, NM 87401
If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks. D 19 29N 5W	Is gos actually connected? When
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.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and resultation of the O'L C	MAY 95 1000
hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of	APPROVED
my knowledge and belief.	BY
7 - 1	TITLE SUF ANY USTON DISTRICT # 3
MAND House	This form is to be filed in compliance with MULE 1104.
(Signature)	If this is a request for allowable for a partly delited as de-
Production & Drilling Clerk	well, this form must be accompanied by a tabulation of the deviation tasts taken on the well in accordance with RULE 111.
May 23, 1988 (Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.
(Date)	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.

DISTRICT! P.O. BOX 1980, Hobbs, 10M \$4240 DISTRICT III DISTRICT III 1000 Rd. Ariec, NM 87410

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Pe, New Mexico 8"504-2088 L --REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator PHILLIPS PETROLEUM COMPANY 300 W ARRINGTON, SUITE 200, FARMINGTON, NM 87401 Reason(a) for Filing (Check proper box) Other (Please explain) Change in Transporter of: New Well \Box Dry Ous D Recomplete X Change in Operator Casinghead One Condensate If change of openior give same
Northwest Pipeline Corp., 3535 E. 30th, Farmington, NM 87401 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lesso States Pederal or Fee Lean No. SAN JUAN 29-5 BLANCO MESAVERDE 111 Location 1050 North Line and Pect Prom The ... Uak Letter _ Feet From The .. Line NMPM Rio Arriba 19 29NTownship Rann County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Coodes sale Address (Give address to which approved copy of this form is to be sent) Gary Energy P.O. Box 159, Bloomfield, NM 87413 Address (Give address to which approved copy of this form is to be sent) Plasse of Authorized Transporter of Casinghead One or Dry One [XX] P.O. Box 58900, SLC. Utah 84158-0900

Li gus schully consocieff | When? Attn: Claire Potter Northwest Pipeline Corp Uek Sec If well produces oil or liquids, two location of tanks. Top Rgs. Is gas actually connected? If this production is commingled with that from any other least or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Rea'v Diff Res'v Designate Type of Completion - (X) Date Spudded Total Depth P.B.T.D. Devations (DF, RKB, RT, GR, esc.) Name of Producing Formation Top Oil/Oas Pay Tubine Depth Performance Denth Casine Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT DEPTH SET 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 Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) WECEIAE Length of Test Tubing Pressure Casing Pressure MCAPR 01 1991 Actual Prod. During Test Oil - Bbb. Water - Bbla. OIL CON. DIV. GAS WELL Actual Fred Test - MCF/D Length of Test Bbla Condensate MMCF Crivity of Goods Tubing Pressure (Shut-in) Cating Pressure (Shut-in) Choke Size Testing Method (pitot, back pr) VI. OPERATOR CERTIFICATE OF COMPLIANCE **OIL CONSERVATION DIVISION** I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives above APR 0 1 1991 is true and complete to the best of my knowledge and belief. **Date Approved** 3-1) Ch By_ l. E. Robinson

igy, Marchis at 11 oak o cole, La Depote mi

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

(505) 599-3412

Printed Name APR 0 1 1991

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

Title_

SUPERVISOR DISTRICT #3

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

Sr. Drlg. & Prod. Engr.

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

4) Separate 1 orm C-104 must be filed for each pool in multiply completed wells.

Appropriate District Office DISTRICT I F.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Ancela, NM 88210

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

OIL CONSERVATION DIVISION P.O. Box 2088

Ener ', Minerals and Natura' esources Department

Saria Fe, New Mexico 8 504-2088

1000 Rio Brazos Rai, Aziec, Pim e/	HEQ	JEST FOR				-				
Operator PHILLIPS PETROLEUM (Well	APING 30039215	 57	•-]
Address 5525 HWY 64 NBU 3004	FADMIN	TON NEW	MEXICO	87401					•.	1
Reason(a) for Filing (Check proper b		JION, NEW	HEXTCO		es (Please expl	eia)	-			┪
Now Well		Change in True		_	•	·	,			
Recompletion U	Oil Casinghe	∐ Dry ud Gess ∏ Cos								
If change of operator give same and address of previous operator										- -
IL DESCRIPTION OF WE	LL AND LE	ASE						,		_
Lease Name San Juan 29-5	Unit		i Name, Includi Blanco I		'de		l of Lease L, Pederal or Pee	L.	esse Na	_
Location	10:	50 _		North Lie	. 81	5	We	est]
Unit Letter	:	Ped	Prom The	Lie	bes	1	Feet From The		Line	
Section 19 Tow	radip 291	Ran	5W	. 10	MPM,	Rio A	Arriba		County	ل
III. DESIGNATION OF TR	ANSPORTE	ER OF OIL	ND NATU	RAL GAS						
Name of Authorized Transporter of C		or Condensate		Address (Giv			ed copy of this form rmington,			
Meridian Oil Transport Name of Authorized Transporter of C	aringhed Gos		Dry Cas X				d copy of this form			-
Williams Field S	ervices-	-Company	NWPC	PO Box	58900	,Salt	Lake Cit	y,UT	84158-	
If well produces oil or liquids, tive location of tanks.	Unit	Sec. Twy	r Rga. 	is gas actuali	y connected?	Who	af Attn:	Clai	re Pott	er
If this production is commingled with IV. COMPLETION DATA	that from any of	her lease or pool,	give comming	ing order numb	ber:					-
Designate Type of Complet	ion • 00	Oli Well	Gas Well	New Well	Workover	Deepea	Plug Back Sa	me Res'v	Diff Res'v]
Data Spudded		pl. Ready to Pro-	L .	Total Depth	L	<u> </u>	P.B.T.D.			┨
	,			Secretaria de Contra		and the second second second second second		and the second second	en	
Elevations (DF, RKB, KT, GR, etc.)	Name of P	roducing Format	ice	Top CilCas	ray		Tubing Depth			
Perforations				<u> </u>	·-··	<u></u>	Depth Casing S	bot		1
	7	TUBING, CA	SING AND	CEMENTI	NG RECOR	D				1
HOLE SIZE		SING A TUBIN			DEPTH SET		SA	CKS CEM	IENT	1
							- 			┨
										1
V. TEST DATA AND REQ	UEST FOR /	LLOWABI	Æ	l			<u> </u>			J
OIL WELL (Test must be af	her recovery of u	stal volume of la					his depth or be for	full 24 Nov	F1.)	٦
Date First New Oil Rua To Tank	Date of Te	€		Producing Me	ethod (Flow, pu	mp, gas ift,	, etc.)			
Length of Test	Tubing Pro	essure.		Casing Press	176		Cho()	GE	IVE	m
Actual Prod. During Test	Oil - Bbls.		· · · · · · · · · · · · · · · · · · ·	Water - Bbis.			Gas JACF			训
Actual Lion Praise Lear		·						UN 4	1 1991.	
GAS WELL							Crivity	<u>CO</u> 1	V DIV	-j
Actual Froil Test - MCF/D	Longth of	Test		Bbla. Conden	mte/MMCF		Gravity or Con	DIST	ſ. 3	3
Testing Method (pitot, back pr.)	Tubing Pro	essure (Shut-in)		Casing Press	ne (Spri-in)		Choke Size			1.
VI. OPERATOR CERTIF I hereby certify that the rules and r Division have been complied with in true and complete to the best of	regulations of the and that the info	Oil Conservation	•				/ATION D			J
LER	luna			Date	Approve	·U	,	 .		-
Signature	C - 5	-1c (P	ad E	By_						
L. E. Robinson	Sr. Di	rlg. & Pr								

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

(505) 599-3412

5-30-91

- 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.
 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED

Duaget But	cau ivo.	1004-0133
Expires:	March 3	1, 1993

BUREAU OF LAND MANAGEMENT 5. Lease Designation and Serial No. SF-078282 SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT - " for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 1. Type of Well San Juan 29-5 Unit Oil Well X Gas Well 8. Well Name and No. 2. Name of Operator SJ 29-5 Unit 11A Phillips Petroleum Company 9. API Well No. 3. Address and Telephone No. 30-039-21557 5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454 10. Field and Pool, or exploratory Area 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit D. 1050' FNL & 815' FWL Blanco Mesaverde Section 19, T29N, R5W 11. County or Parish, State Rio Arriba, CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12. TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion **New Construction** Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection Other Add pay & stimulate Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* POOH w/production tubing. Isolate existing Mesaverde perfs with MIRU. ND WH & NU BOPs. retrievable bridge plug. Perforate and stimulate Lewis Shale (perfs to be determined after logs are run). Retrieve RBP and run production tubing. *Flow test Lewis Shale. A workover pit maybe required. OIL CON. DIV. Regulatory Assistant Title Date

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements



Approved by

S/Duane W. Spence

Form 3160-5 (June 1990)

Notice of Intent

X Subsequent Report

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED						
Budget Bure	au No.	100	4-013:	5		
Evnires:	March	21	1003			

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_						_
T	~ D.				1 1 31	

SF-078282 SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT - " for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE Type of Well San Juan 29-5 Unit Oil Well X Gas 8. Well Name and No. 2. Name of Operator SJ 29-5 Unit #11A Phillips Petroleum Company 9. API Well No. 3. Address and Telephone No. 30-039-21557 5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454 10. Field and Pool, or exploratory Area 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit D, 1050' FNL & 815' FWL Blanco Mesaverde Section 19, T29N, R5W 11. County or Parish, State Rio Arriba. NM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION

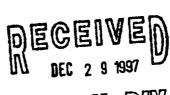
П	<u></u>	Casing Repair	Ц	Water Shut-Off
Final Abandonment Notice	<u>_</u>	Altering Casing		Conversion to Injection
	X	Other Add pay & stimulate		Dispose Water
			(No	te: Report results of multiple completion on Well
			Co	mpletion or Recompletion Report and Log form.)

Abandonment

Recompletion

Plugging Back

See the attached for details of the procedure used to add Lewis Shale pay to the existing Mesaverde formation and stimulate.



OIL CON. DIV.

Change of Plans

New Construction

Non-Routine Fracturing

$\overline{}$	DIEI. 3			
4. I herethe coffety that the foregoing is true and cornect/ Signed LUSY W	Title	Regulatory Assistant	Date	
(This space for Federal or State office use) Approved by	Title	AUC	EPTED FOR RECORD	
Conditions of approval, if any:			DEC 2 2 1997	

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

* See Instruction on Reverse Side

FARMINGTON DISTRICT OFFICE



^{13.} Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

San Juan 29-5 Unit #11A SF-078282; Unit D, 1050' - FNL & 815' FWL Section 19, T29N, R5W; Rio Arriba County, NM

Details of procedure used to add Lewis Shale pay to existing MV & stimulate.

12/6/97

MIRU Big A #29. Kill well w/2% KCl. ND WH & installed BPV. NU BOPs. PT - OK. Pulled BPV. COOH w/tubing.

RU Blue Jet. RIH & set RBP @ 5400'. Dumped sand on top of plug. Load hole w/2% KCl & PT plug, casing and rams to 500 psi - 30 min. OK. Ran GR, CCL log from 5390' - 3700'. Good cement behind intervals. Blue Jet perf'd Lewis Shale w/ 1 spf (.38" holes) as follows:

5260' - 5265' (5');	5159' - 5164' (5');	5012' - 5017' (5');	
4903' - 4908' (5');	4814' - 4819' (5');	4670' - 4675' (5');	
4598' - 4603' (5');	4473' - 4478' (5');	4400' - 4405' (5');	
4326' - 4331' (5');	4278' - 4283' (5');	4251' - 4256' (5');	Total 60 holes

RIH & set Fullbore Packer. RU BJ to acidize perfs. Pumped 1500 gal of 15% HCL w/ballsealers. Surged balls off & released packer & retrieved balls.

RU to frac. Reset packer @ 3792'. RIH & set RDT on wireline @ 4500'. PT - OK. Pumped 109,200 gal of 60 Quality Foam consisting of 47,880 gal of 30# Linear gel & 1.29 mmscf N_2 . Pumped a total of 303,000 # 20/40 Arizona sand. Flushed with 61 bbls of 2% KCl. Avg. rate 60 bpm and avg treating pressure 2900 psi. ISDP - 900 psi. Flowed back immediately on '4" choke for approx. 42 hours.

RU Blue Jet and ran Audio log across perforated zones. RIH & cleaned out fill and retrieved RBP. COOH. RIH w/2-3/8" production tubing. Cleaned out fill and then set tubing @ 5950'. ND BOP & NU WH. Pull BPV. PT tubing to 1000 psi. Pump off check. RD & release rig 12/16/97. Turned well over to production department.