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| SANTA FE               |     |
| FILE                   |     |
| U.S.G.S.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION OFFICE      |     |

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API #30-039-22534

|  |   |
|--|---|
| Operator<br>Northwest Pipeline Corporation     |   |
| Address<br>P.O. Box 90, Farmington, N.M. 87401 |   |
| Reason(s) for Filing (Check proper box)        |   |
| 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"/> |
| Other (Please explain)                         |   |

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

|                             |                 |  |   |                        |
|-----------------------------|-----------------|--|---|------------------------|
| Lease Name<br>San Juan 29-5 | Well No.<br>100 | Pool Name, including Formation<br>Gobernador Pictured Cliffs | Kind of Lease<br>State, Federal or Foreign<br>XXXX XXXX | Lease No.<br>SF 078917 |
| Location                    |                 |  |   |                        |
| Unit Letter<br>G            | 1885'           | Feet From The<br>North                                       | Line and<br>1165  | Feet From The<br>East  |
| Line of Section<br>25       | Township<br>29N | Range<br>5W  | N.M.P.M.<br>Rio Arriba                                  | County                 |

II. 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   | P.O. Box 90, Farmington, N.M. 87401                                      |                                 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |                                 |
| Northwest Pipeline Corporation   | P.O. Box 90, Farmington, N.M. 87401                                      |                                 |
| If well produces oil or liquids,<br>give location of tanks.  | Unit   | Sec. Twp. Rge.                  |
|  |  | Is gas actually connected? When |

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

V. 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<br>4-12-81                        | Date Compl. Ready to Prod.<br>6-16-81 / 6-30-81 |          | Total Depth<br>6195'     |          | P.B.T.D.<br>3850 (PC)      |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)<br>6795' GR | Name of Producing Formation<br>Pictured Cliffs  |          | Top Oil/Gas Pay<br>3638' |          | Tubing Depth<br>3708'      |           |             |              |
| Perforations<br>3638' - 3795'                  |   |          |                          |          | Depth Casing Shoe<br>6195' |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD           |   |          |                          |          |                            |           |             |              |
| MOLE SIZE                                      | CASING & TUBING SIZE                            |          | DEPTH SET                |          | SACKS CEMENT               |           |             |              |
| 12-1/4"  | 9-5/8"  |          | 198'                     |          | 115 SX                     |           |             |              |
| 8-3/4"   | 7"  |          | 4080'                    |          | 160 SX                     |           |             |              |
| 6-3/4"   | 4-1/2"  |          | 3884' - 6195'            |          | 230 SX                     |           |             |              |
|  | 1-1/4"  |          | 3708'                    |          |                            |           |             |              |

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

GAS WELL Test Date 6-23-81

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| CV 2301 - AOF 4246 MCFD          | 3 hrs                     |                           |                       |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |
| Back Pressure                    | 1081 psig                 | 1082 psig                 | 2" X .750"            |

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.

Donna J. Brace  
Donna J. Brace (Signature)  
Production Clerk  
(Title)  
7-13-81  
(Date)

OIL CONSERVATION COMMISSION  
JAN 11 1982  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
Original Signed by FRANK T. CHAVEZ  
BY \_\_\_\_\_  
SUPERVISOR DISTRICT #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.  
Form C-104 must be filed for each pool in multiply