

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-21977

DATE OF PERMIT	3
OPERATOR	1
TRANSPORTER	7
OPERATION OFFICE	

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	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 30-6 Unit	Well No. 18A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Bldg.	Lease No. NM03385
Location Unit Letter <u>I</u> ; <u>1800</u> Feet From The <u>South</u> Line and <u>910</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>30-N</u> Range <u>6-W</u> , NMPM, Rio Arriba County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 18
	Twp. 30-N	Rge. 6-W
	Is gas actually connected? When	

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

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 7-15-79	Date Compl. Ready to Prod. 9-20-79	Total Depth 6030'	P.B.T.D. 6014'					
Elevations (DF, R&B, RT, GR, etc.) 6424' G.L.	Name of Producing Formation Mesa Verde	Top Gas Pay 5249'	Tubing Depth 5903'					
Perforations 5249, 5261, 5267, 5280, 5284, 5320, 5326, 5332, 5349, 5359, 5373, 5386, 5394, 5426, 5464, 5479, 5558, 5566, 5596, 5601, 5607, 5613, 5619, 5625, 5640, 5646, 5652, 5658, 5664, 5670, 5676, 5706, 5714, 5722, 5739, 5834, 5848, 5856, 5869, 5879, 5907, 5963, 5970'			Depth Casing Shoe 6030'					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15 3/8"	9 5/8"	219'	224 cf.					
8 3/8"	7"	3702'	286 cf.					
6 1/4"	4 1/2" Liner	3548-6030'	438 cf.					
	2 3/8"	5903'	tubing					

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 (pilot, back pri.)	Tubing Pressure (Shut-in) 575	Casing Pressure (Shut-in) 662	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.



Drilling Clerk

10-1-79

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY Original _____

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.