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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"/>	Sig. Trans. change from PLA
Recompletion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>

If change of ownership give name and address of previous owner Amoco Production Company, 501 Airport Dr., Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rosa Unit	Well No. 64	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal, or Other XXX XXXX	Lease No. SF 078764
Location				
Unit Letter A	790	Feet From The North	Line and 790	Feet From The East
Line of Section 29	Township 31N	Range 5W	NMPM,	Rio Arriba County

III. 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	3539 E 30th St., Farmington, New Mexico 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	3539 E 30th St., Farmington, New Mexico 87401	
If well produces oil or liquids, 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:

IV. 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 8-7-78	Date Compl. Ready to Prod. 10-31-78	Total Depth 8108'	P.B.T.D. 8070'					
Elevations (DF, RKB, RT, GR, etc.) 6397' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7950'	Tubing Depth 8021'					
Perforations 7950' - 8014'	Depth Casing Shoe 8108'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15"	10-3/4"	328'	315					
9-7/8"	7-5/8"	3812'	1210					
6-3/4"	4-1/2"	8108'	245					
-	2-3/8" tbq	8021'	-					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 10-30-78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL		Bbls. Condensate/MCF		Gravity of Condensate	
Actual First Test-MCF/D	Length of Test 3 hrs	-		-	
CV 1321 AOF 1843	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Testing Method (pilot, back pr.) Back Pressure	2280 psig	2280 psig	2.375" X 0.750"		

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.

*Richard C. Rex*

(Signature)

Production Clerk

(Title)

November 17, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19

Original Signed by A. H. \_\_\_\_\_  
BY SUPERVISOR DIST. #

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