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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

API #30-039-22305

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

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------|--|--------------------------------------|-----------------------|
| Lease Name San Juan 31-6 Unit | Well No. 37 | Pool Name, including Formation Basin Dakota | Kind of Lease State, XXXXXXXXXXXX | Lease No. E 347-26 |
| Location Unit Letter 0 : 1000' Feet From The South Line and 900' Feet From The East | | | | |
| Line of Section 36 Township 31N Range 6W, 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 LT | 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 GT | P.O. Box 90, Farmington, N.M. 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:

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 12-8-80 | Date Compl. Ready to Prod. 4-14-81 | Total Depth 8084' | P.B.T.D. 8030' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6531' GR | Name of Producing Formation Dakota | Top Oil/Gas Pay 7920' | Tubing Depth 7945' | | | | | |
| Perforations 7920' - 7934' | 7952' - 7980' | Depth Casing Shoe 8084' | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 12-1/4" | 9-5/8" | 359' | 250 SX | | | | | |
| 8-3/4" | 7" | 3940' | 210 SX | | | | | |
| 6-1/4" | 4-1/2" | 8084' | 355 SX | | | | | |
| | 2-3/8" | 7945' | | | | | | |

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 4-14-81

| | | | |
|---|--|--|--------------------------|
| Actual Prod. Test-MCF/D CV 2370 AOF 2498 | Length of Test 3 hrs | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (Shut-in) 2906 psig | Casing Pressure (Shut-in) 2910 psig | Choke Size 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)
April 28, 1981 (Date)

OIL CONSERVATION COMMISSION

APPROVED
BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.
Complete Form C-104 must be filed for each pool in multiple