NO OF COP ES RECEIVED	•		_
DISTRIBUTION		ONSERVATION COMMISSION	Form C-194 Supersedes Old C-104 and C-
SANTA FE	REQUEST FOR ALLOWABLE Superiedes Did Cito and Ci		
FILE	-	CMA	
u.s.g.s.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL GA	4\$
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR		20100	
PRORATION OFFICE	API # 30-039-	-22488	
Northwest Pipeline	Corporation		
P.O. Box 90, Farmin			
Reason(s) for filing (Check proper box	igeon, non ovia	Other (Please explain)	
	Change in Transporter of:	İ	
New Well X	OI: Dry G	25	
Recompletion		ensate	
Change in Ownership	Castuduend Gas		
f change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE	Formation Kind of Lease	Lease N
Lease Name	Ven No. Pool Name, Including	. 01	_
San Juan 31-6 Unit	36 Basin Dakot	a XXXXX Federal	XXXX SF 07899
	Jo Dasin Bare	-	
Location Unit Letter A : 80	Feet From The North	ine and 790 Feet From T	the East
Line of Section 27 To	ownship 31N Range 6W	, NMPM, Rio Ari	riba Coun
	amen or out AND NATURAL G	245	
DESIGNATION OF TRANSPOR	OF Condensate X	Audress (Give address to which approx	ved copy of this form is to be sent;
Name of Authorized Transporter of C		P.O. Box 90, Farming	ton, N.M. 874 <u>01</u>
Northwest Pipeline	Corporation asymphesis Gas Corporation	Address (Give address to which appro-	ved copy of this form is to be sent)
Name or Authorized Transporter of C	asinghead Gas of Diff Gas A.s.	1	
Northwest Pipeline	Corporation	P.O. Box 90. Farming	en
If well produces oil or liquids,	Unit Sec. Twp. Pge.	is day detain, commenter	
give location of tonks.			
	with that from any other lease or poo	l, give commingling order number:	
If this production is commingled v	vich that how day office y		Plug Back   Same Resty, Diff. R
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Busk Same Heb 11
Designate Type of Complet	tion = (X)	X	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded		7890'	7870 <b>'</b>
12-23-80	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.	′	7806 <b>'</b>	7807'
6132' GR	Dakota	7000	Depth Casing Shoe
Perforations			7890'
7806'	- 7830' @ 1 SPF W/ total	l of 25 holes	1
	TUBING, CASING, A	ND CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
	9-5/8"	358'	275
12-1/4"	8-3/4" 2 '	3759'	
8-3/4"	4-1/2"	7890'	325
6-1/4"	4-1/2	7807'	
	2-3/8"	e after recovery of total volume of load vi	l'and must be equal to or exceed top
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must b	e after recovery of total volume of toda of elegan of depth or be for full 24 hours?	· · · · · · · · · · · · · · · · · · ·
OIL WELL		Producing Method (Flow, pump, gas	lift, etc.)
Date First New Cil Run To Tanks	Date of Test	From a company of the	the second second
		<u> </u>	Choke Size
Length of Test	Tubing Presente	Casing Pressure	
Faudin or rear			Convice
	Cil-Bbls.	Water - Bbis.	Gds-MCF
Actual Prod. During Test	0 2		
B D	0.3-8-81		
GAS WELL Test Dat	e 3-8-81	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D			
CV 2557 AOF 2736 MCF	D 3 hrs Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Tarred (pitot, back pr.)	Indied Stepsma ( Summer )	· ·	211 77 75011

Testing Method (pitot, back pr.)

Back Pressure

VI. CERTIFICATE OF COMPLIANCE

onna Brace

March 19, 1981

Production

Donna J.

2744 psig

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given have is true and complete to the best of my knowledge and belief.

Clerk (Title)

(Date)

2" X\_

OIL CONSERVATION COMMISSION

This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen of 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 all completely able 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.

manie or manner, or man he filled for each or it in multiply

2744 psig

APPROVED.

TITLE .

MAK

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT 第 3

.750"