NO OF COPES ACCEIVED	NEW MEXICO OIL CO	NSERVATION COMM	SSION /	Form C-104	
SANTA FE	REQUEST FOR ALLOWABLE			Supersedes ()Id C-104 and C-110 Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRAN	CAA.	INTUDAL CAS		
LAND OFFICE	AUTHORIZATION TO TRAN	ASPUR : DIE AND I	AATORAL GAS		
TRANSPORTER OIL					
GAS					
PRORATION OFFICE					
Operator	<u> </u>				
Northwest Pipeli	ne Corporation				
P.O. Box 90. Far	mington, N.M. 87401				
Reason(s) for filing (Check proper box)		Other (Please	explains		
New Well	Change in Transporter of: OII Ory Gas []				
Recompletion Change in Ownership					
If change of ownership give name and address of previous owner		<u> </u>			
DESCRIPTION OF WELL AND	LEASE Well No., Pool Name, Including For	rmation	Kind of Lease	Lease No.	
Rosa Unit	77 Mesa Verde	<u></u>	State, XXXX	X SF 078773	
Location					
Unit Letter I : 1820 Feet From The South Line and 810' Feet From The West					
Line of Section 33 Tov	vnshto 31N Range	5W , NMPL	. Rio Ar	riba County	
DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GAS	S Address (Give address	to which approved cop	y of this form is to be sent)	
:	,	P.O. Box 90,	Farmington, N	M, 87401	
Northwest Pipeline Corporation Name of Authorized Transporter of Casinghead Gas of Cry Gas X Northwest Pipeline Corporation Northwest Pipeline Corporation P.O. Box 90, Farmington, N.M. 87401 P.O. Box 90, Farmington, N.M. 87401					
Northwest Pipeli	ne Corporation Unit Sec. Twp. Rge.	Is gas actually connec		,M. 0/401	
If well produces cil or liquids, give location of tanks.					
If this production is commingled wi . COMPLETION DATA	th that from any other lease or pool, g			Back Same Res'v. Diff. Res'v.	
Designate Type of Completic	on - (X) Cil Well Gas Well X	New Well Workover	Deepen 'Plug	Back Same Resiv. Diff. Resiv.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	. P.B.	T.D.	
11-5-80	5-5-81	8165'		8125'	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay 5562 h	ומטו	ng Depth 5791 !	
6531' GR	Mesa Verde	3502		h Casing Shoe	
Mesa Verde 5562			81651		
	TUBING, CASING, AND	CEMENTING RECO	RD		
HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CEMENT	
17-1/4"	10-3/4"	329 ¹ 3770 ¹		450 210	
9-7/8"	7-5/8" 5-1/2"	8165		300	
6-3/4"	1-1/4"	5791			
7. TEST DATA AND REQUEST F	OP ATTOWARTE (Test must be at	fter recovery of total vol pth or be for full 24 hou	13)	ist be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w. pump, by life esc.		
Length of Test	Tubing Pressure	Casing Pressure	MANA	ke Size	
Actual Prod. During Test	Cti-Bbis.	Water - Shis.	OIL W	1880	
		<u></u>	DIST.	3	
GAS WELL 5-5-81	1	Bbls. Condensate/MM	CF Cre	of Condensate	
Actual Prod. Test-MCF/D CV 1719 AOF 4777	Length of Test 3 hrs	_		₹.	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shr		the Size	
Back Pressure	1089 psig	1094 psig		" X 750" N COMMISSION	
I. CERTIFICATE OF COMPLIAN		OIL CONSERVATION COMMISSION			
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	igned by FRANK T.	<u> </u>	
Commission have been complied with and that the information given above is true and complete to the beat of my knowledge and belief.		BY	BY		
		TITLESUPERVISOR DISTRICT 批 3			

Production Clerk

(Title)

5-21-81 (Date)

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.

Fit out only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.

This form is to be filed in compliance with RULE 1104.