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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
INANSPORTER	GAS		
OPERATOR			

July 6, 1983

	SANTA FE FILE		INSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
Ţ	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL G	SAS		
}	LAND OFFICE					
ı	TRANSPORTER GAS					
	OPERATOR					
1.	PRORATION OFFICE Operator					
	Northwest Pipeline Co	orporation				
	Address					
	P.O. Box 90, Farming Reason(s) for filing (Check proper box)	ton, N.M. 8/499	Other (Please explain)			
	New Well	Change in Transporter of:	O ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Recompletion	OII Dry Gas	-			
	Change in Ownership	Casinghead Gas Condens	sate			
	If change of ownership give name					
	and address of previous owner					
11.	DESCRIPTION OF WELL AND L	EASF. Well No. Pool Name, Including Fo	rmation Kind of Lease	e Lease No.		
	Rosa Unit	94 Blanco Mesa	C 5-1	1 % ₹ ₹ \$ SF 078769		
	Location					
	Unit Letter K : 1820 Feet From The West Line and 1650 Feet From The South					
	Line of Section 16 Town	nship 3]N Range 5 <i>t</i>	W , NMPM, Rio Arr	riba County		
			_			
! II .	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Cil	or Condensate	Address (Give address to which appro			
	Name of Authorized Transporter of Cas.	inghead Gas or Dry Gas 🕅	Address (Give address to which appro			
	Northwest Pipeline Cor	poration Unit Sec. Twp. Ege.	P.O. Box 90, Farmington	n, N.M. 8/499		
	If well produces oil or liquids, give location of tanks.	Chit Sec. This Tage	NO			
	If this production is commingled with	h that from any other lease or pool,	give commingling order number:			
IV. COMPLETION DATA OII Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Re						
	Designate Type of Completio		X			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 5780'	P.B.T.D. 5715'		
	8-4-82 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Off/Gas Pay	Tubing Cepth		
	6268' KB	Mesa Verde	5360'	5553'		
	Perforations			Depth Casing Shoe		
	5369'-5681'	TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	13-3/4"	9-5/8"	234'	226 cu.ft Cl B 105 & 89 cu.ft Cl B		
	8-3/4" 6-1/4"	4-1/2"	3600' 3398'-5775'	235 cu.ft Cl B		
		2-3/8"	5553'			
v	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-		
OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
			Control	actor of the contract of the c		
	Length of Test	Tubing Pressure	Casing Pressure			
	Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	JUL 1 8 1583		
				JULIO		
				OIL CON. DIV		
	GAS WELL Test Date 6-	Length of Test	Bbis. Condensate/MMCF	Gravity a Stenedte		
	(AOF 202) 25 MCF	3 hrs	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	1006 psig	2" X .750"		
/	Back Pressure CERTIFICATE OF COMPLIAN	l 1006 psig				
٧I			7-22-83 JUL 22 1983			
	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 (Signature) Production Clerk (Title)		APPROVED			
			BY Original Signed by The Supervisor District # 3			
			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 allow-			
			All sections of this form must be filled out completely for show- able on new and recompleted wells.			

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.