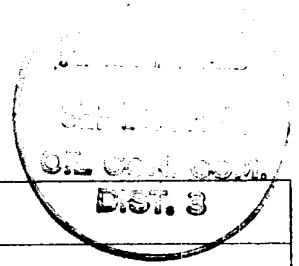


SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	2
PRORATION OFFICE	

**REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

*Supersedes Old C-104 and C-110  
Effective 1-1-65*



**I. Operator**  
El Paso Natural Gas Company

**Address**  
Box 990, Farmington, New Mexico - 87401

**Reason(s) for filing (Check proper box)**

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain) **See Back for Details**

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Riddle A</b>	Well No. <b>3 (OWWO)</b>	Pool Name, including Formation <b>Blanco Mesa Verde</b>	Kind of Lease State, Federal or Fee <b>X</b>	Lease No. <b>SE 078201-A</b>
Location Unit Letter <b>M</b> ; <b>800</b> Feet From The <b>South</b> Line and <b>1090</b> Feet From The <b>West</b>				
Line of Section <b>24</b> Township <b>30N</b> Range <b>9W</b> , NMPM, <b>San Juan</b> 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)
<b>El Paso Natural Gas Company</b>	<b>Box 990, Farmington, New Mexico</b>
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)
<b>El Paso Natural Gas Company</b>	<b>Box 990, Farmington, New Mexico</b>
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When
	<b>M   24   30N   9W</b>

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.
		<b>X</b>		<b>X</b>			<b>X</b>	
Date Spudded <b>W/O 8-16-67</b>	Date Compl. Ready to Prod. <b>W/O 8-30-67</b>	Total Depth <b>4805'</b>	P.B.T.D. <b>4785'</b>					
Elevations (DF, RKB, RT, GR, etc.) <b>5716' GL</b>	Name of Producing Formation <b>Mesa Verde</b>	Top Gas Pay <b>4141</b>	Tubing Depth <b>4675'</b>					
Perforations <b>4141-45, 4158-74, 4186-90; 4640-56; 4670-74, 4680-84, 4696-4712, 4730-38'</b>						Depth Casing Shoe <b>4805'</b>		
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<b>13 3/4"</b>	<b>9 5/8"</b>	<b>166'</b>	<b>125 Sks.</b>					
<b>8 3/4"</b>	<b>7"</b>	<b>4015'</b>	<b>500 Sks.</b>					
<b>6 1/4"</b>	<b>4 1/2"</b>	<b>4805'</b>	<b>105 Sks.</b>					
<b>4 1/2"</b>	<b>2 3/8"</b>	<b>4675'</b>	<b>Tubing</b>					

**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**

Actual Prod. Test - MCF/D <b>7413 MCF/D</b>	Length of Test <b>3 Hours</b>	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) <b>Calculated A.O.F.</b>	Tubing Pressure (shut-in) <b>775</b>	Casing Pressure (shut-in) <b>796</b>	Choke Size <b>3/4"</b>

**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.

Original signed by  
**Carl E. Matthews**

\_\_\_\_\_  
(Signature)  
Petroleum Engineer  
(Title)  
September 12, 1967  
(Date)

**OIL CONSERVATION COMMISSION**

APPROVED **SEP 13 1967**, 19\_\_\_\_

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR 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.

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

WORKOVER

- 8-16-67 Rigged up Dwinell Bros. rig #1. Pulled tubing, set cement retainer at 3895', tested 7" casing to 1000# O.K. Squeezed open hole w/225 sacks cement. Fert. 4 squeeze holes at 1300'. Set cement retainer at 1212', squeezed through perfs w/350 sacks of cement. W.O.C. 12 hours. Tested perfs w/800# O.K.
- 8-18-67 Drilling sidetrack hole w/gas. 1" at 4015', 4 1/2" at 4032', Drilling - 3 1/4" at 4096', 3 1/4" at 4157', Hole wet at 4400'. Drilling - 2 1/4" at 4652', 1 1/2" at 4805'. Total depth.
- 8-21-67 Ran 150 joints 4 1/2", 10.5#, J-55 casing (4795') set at 4805' w/105 sacks of cement. W.O.C. 18 hours.
- 8-22-67 P.B.T.D. 4785'. Tested casing to 4000# O.K. Perf. 4640-56' w/16 holes. Frac w/18,000# sand, 18,000 gal. water. BDP 2900#, tr. pr. 1800#. I.R. 53 BFM. Perf. 4670-74', 4680-84', 4696-4712', 4730-38' w/16 SPZ. Dropped 18 balls and displaced to 4656', pressured to 2400#. Frac w/40,000# sand, 44,478 gal. water. Dropped 2 sets of 16 balls and 1 set of 32 balls. Tr. pr. 1500-1600-1500#. I.R. 57 BFM. Set Bridge plug at 4265', tested w/3200# O.K. Perf. 4141-45', 4158-74', 4186-90' w/16 SPZ. Frac w/34,000# sand, 38,220 gal. water. BDP 2100#, tr. pr. 1300-1700-1600#. Dropped 2 sets of 16 balls. I.R. 57 BFM.
- 8-23-67 Blew well and ran 150 joints 2 3/8", 4.7#, J-55 tubing (4665') landed at 4675', pin collar and nipple on bottom.
- 8-30-67 Date well was tested.