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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator El Paso Natural Gas Co.	8. Farm or Lease Name Florance
3. Address of Operator PO Box 990, Farmington, New Mexico	9. Well No. 8
4. Location of Well UNIT LETTER B, 850 FEET FROM THE N LINE AND 1800 FEET FROM THE W LINE, SECTION 20 TOWNSHIP 30N RANGE 9W NMPM.	10. Field and Pool, or Wildcat Blanco PC
15. Elevation (Show whether DF, RT, GR, etc.) 6072' GL	12. County

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER installed tubing <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

2-9-70 Installed 86 jts. tubing and 2 pup jts. 1 1/4", 2.33 lbs., JCW-55, Non-upset IJ 10R (2769.95') set at 2779.95'.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED J.B. Grant TITLE Production Engineer DATE 2-9-70  
APPROVED BY Emmy Cherry TITLE SUPERVISOR DIST. #3 DATE FEB 18 1970  
CONDITIONS OF APPROVAL, IF ANY:

Initial  
Deliverability Test

# NEW MEXICO OIL CONSERVATION COMMISSION WELL DELIVERABILITY TEST REPORT FOR 1970

Form C122-A  
Revised 1-1-68

POOL NAME <b>Blanco</b>	POOL SLOPE <b>n = .85</b>	FORMATION <b>PC</b>	COUNTY <b>SJ</b>
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87031

COMPANY <b>El Paso Natural Gas Co.</b>			WELL NAME AND NUMBER <b>Florance No. 8</b>		
UNIT LETTER <b>C</b>	SECTION <b>20</b>	TOWNSHIP <b>30</b>	RANGE <b>9</b>	PURCHASING PIPELINE <b>EPNG</b>	
CASING O.D. - INCHES <b>2.875</b>	CASING I.D. - INCHES <b>2.441</b>	SET AT DEPTH - FEET <b>2834</b>	TUBING O.D. - INCHES <b>1.660</b>	TUBING I.D. - INCHES <b>1.380</b>	TOP - TUBING PERF. - FEET <b>2780</b>
GAS PAY ZONE FROM <b>2771</b> TO <b>2783</b>		WELL PRODUCING THRU CASING TUBING <b>XX</b>		GAS GRAVITY <b>.655</b>	GRAVITY X LENGTH <b>1821</b>
DATE OF FLOW TEST FROM <b>2-26-70</b> TO <b>3-6-70</b>			DATE SHUT-IN PRESSURE MEASURED <b>10-4-69</b>		

## PRESSURE DATA - ALL PRESSURES IN PSIA

(a) Flowing Casing Pressure (DWt) <b>-</b>	(b) Flowing Tubing Pressure (DWt) <b>-</b>	(c) Flowing Meter Pressure (DWt) <b>-</b>	(d) Flow Chart Static Reading <b>-</b>	(e) Meter Error (Item c - Item d) <b>0</b>	(f) Friction Loss (a-c) or (b-c) <b>0</b>	(g) Average Meter Pressure (Integr.) <b>195</b>
(h) Corrected Meter Pressure (g+e) <b>195</b>	(i) Avg. Wellhead Press. $P_f = (h+f)$ <b>195</b>	(j) Shut-in Casing Pressure (DWt) <b>575</b>	(k) Shut-in Tubing Pressure (DWt) <b>-</b>	(l) $P_m$ = higher value of (j) or (k) <b>575</b>	(m) Del. Pressure $P_d = 80$ % $P_c$ <b>460</b>	(n) Separator or Dehydrator Pr. (DWt) for critical flow only

## FLOW RATE CORRECTION (METER ERROR)

Integrated Volume - MCF/D <b>507</b>	Quotient of $\frac{\text{Item c}}{\text{Item d}}$ <b>1.0000</b>	$\sqrt{\frac{\text{Item c}}{\text{Item d}}}$ <b>1.0000</b>	Corrected Volume <b>q = 507</b> MCF/D
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## WORKING PRESSURE CALCULATION

$(1-e^{-s})$ <b>.124</b>	$(F_c Q_m)^2 (1000)$ <b>155809</b>	$R^2 = (1-e^{-s}) (F_c Q_m)^2 (1000)$ <b>19320</b>	$P_1^2$ <b>38025</b>	$P_w^2 = P_1^2 + R^2$ <b>57345</b>	$P_w = \sqrt{P_w^2}$ <b>239</b>
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## DELIVERABILITY CALCULATION

$D = Q \left[ \frac{P_c^2 - P_d^2}{P_c^2 - P_w^2} \right]^n =$ <b>507</b>	$\left( \frac{119025}{273280} \right)^n =$ <b>.4355</b>	$=$ <b>.4934</b>	$=$ <b>250</b> MCF/D
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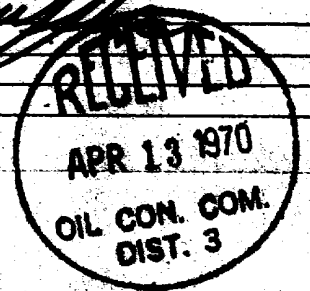
REMARKS:

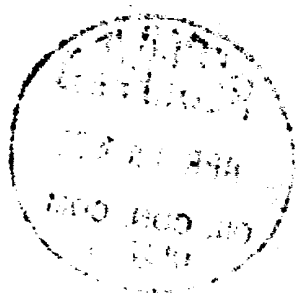
Ran tubing, 1st del. 2-11-70.

### SUMMARY

Item h **195** Psia  
 $P_c$  **575** Psia  
 $Q$  **507** MCF/D  
 $P_w$  **239** Psia  
 $P_d$  **460** Psia  
 $D$  **250** MCF/D

Company **El Paso Natural Gas Company**  
 By **R.E. Smith**  
 Title  
 Witnessed By  
 Company





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	GAS	
OPERATOR		2
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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-105  
Effective 1-1-65

I. Operator  
El Paso Natural Gas Company

Address  
P. O. Box 990, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box) Other (Please explain)

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"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 8	Pool Name, including Formation Blanco, Pictured Cliffs	Kind of Lease State, Federal or Fee
Location Unit Letter C ; 850 Feet From The North Line and 1800 Feet From The West			
Line of Section 20 , Township 30 Range 9 , NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
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:

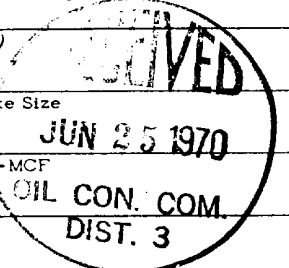
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
Installed additional tubing, turned back on production 2-11-70.								

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

T. B. Grant (Signature)  
Production Engineer  
(Title)

June 9, 1970

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 25 1970  
BY Original Signed by Emery C. Arnold  
SUPERVISOR DIST. #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 allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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