

EL PASO NATURAL GAS COMPANY  
OPEN FLOW TEST DATA

DATE February 8, 1972

Operator EL PASO NATURAL GAS COMPANY		Lease Woodriver No. 3 (OWWO)	
Location 1660 N 1175 W Sec. 5-30-9		County San Juan	State New Mexico
Formation PC		Pool Blanco	
Casing Diameter 2.875	Set At: Feet 3153	Tubing Diameter 1.660	Set At: Feet 3035
Pay Zone: From 3060	To 3092	Total Depth: 3153	Shut In 1-31-72
Stimulation Method SWF		Flow Through Casing	Flow Through Tubing XX

Choke Size, Inches .750	Choke Constant: C 12.365		Set packer on bottom 3035.52'	
Shut-In Pressure, Casing, PSIG	+ 12 = PSIA	Days Shut-In 7	Shut-In Pressure, Tubing PSIG	+ 12 = PSIA
			434	446
Flowing Pressure: P PSIG	+ 12 = PSIA		Working Pressure: Pw PSIG	+ 12 = PSIA
42	54		Calculated	193
Temperature: T = 56 °F	n =		Fpv (From Tables)	Gravity
F <sub>r</sub> = 1.0048	.85		1.004	.655 F <sub>g</sub> = 0.9571

$$\text{CHOKE VOLUME} = Q = C \times P_t \times F_t \times F_g \times F_{pv}$$

$$Q = (12.365)(54)(1.0048)(0.9571)(1.004) = \underline{645} \text{ MCF/D}$$

$$\text{OPEN FLOW} = Aof = Q \left( \frac{P_c^2}{P_c^2 - P_w^2} \right)^n$$

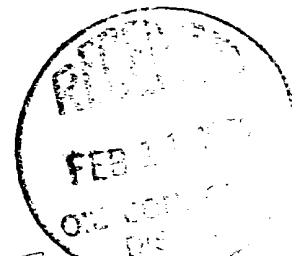
Note: Well blew dry gas throughout test.

$$Aof = \left( \frac{198916}{161667} \right)^n = (645)(1.2304)^{.85} = (645)(1.1926)$$

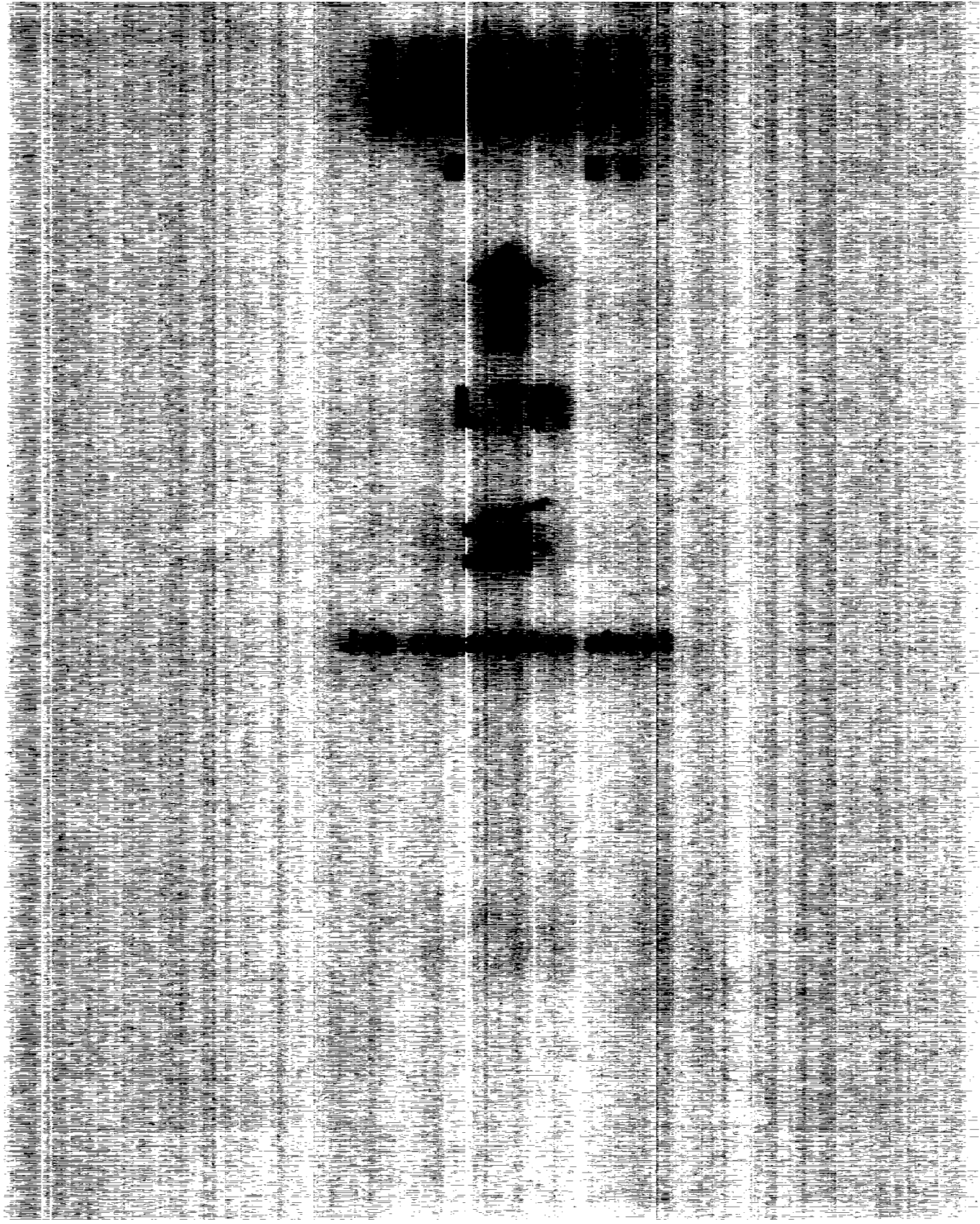
$$Aof = \underline{769} \text{ MCF/D}$$

TESTED BY Roger Hardy

WITNESSED BY \_\_\_\_\_



*H. E. McNally*  
H. E. McNally



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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Meridian Oil Inc.

Address  
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

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

Other (Please explain)  
Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Woodriver	Well No. 3	Pool Name, including Formation Blanco Pictured Cliffs	Kind of Lease State (Federal) or Fee	Lease No. SF 078316D
Location Unit Letter <u>E</u> : <u>1660</u> Feet From The <u>North</u> Line and <u>1175</u> Feet From The <u>West</u> Line of Section <u>5</u> Township <u>30N</u> Range <u>9W</u> NMPM, <u>San Juan</u> 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"/> Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. Unit <u>E</u> Sec. <u>5</u> Twp. <u>30N</u> Rge. <u>9W</u>	Is gas actually connected? <u>When</u>

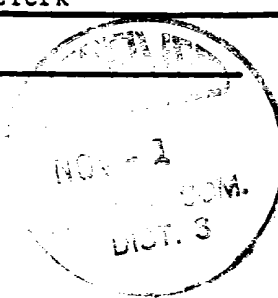
If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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

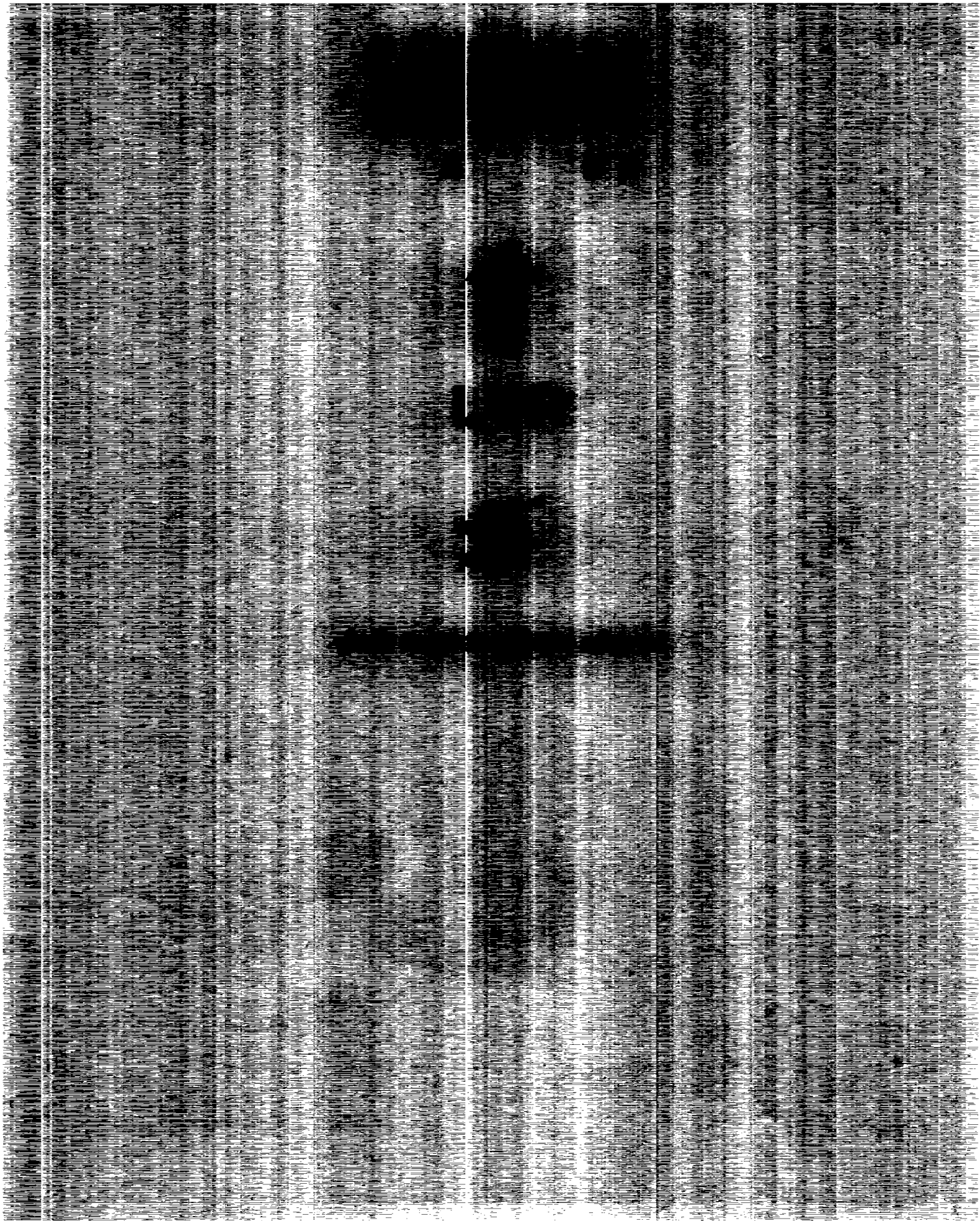
[Signature]  
(Signature)  
Drilling Clerk  
(Title)  
11-1-86  
(Date)

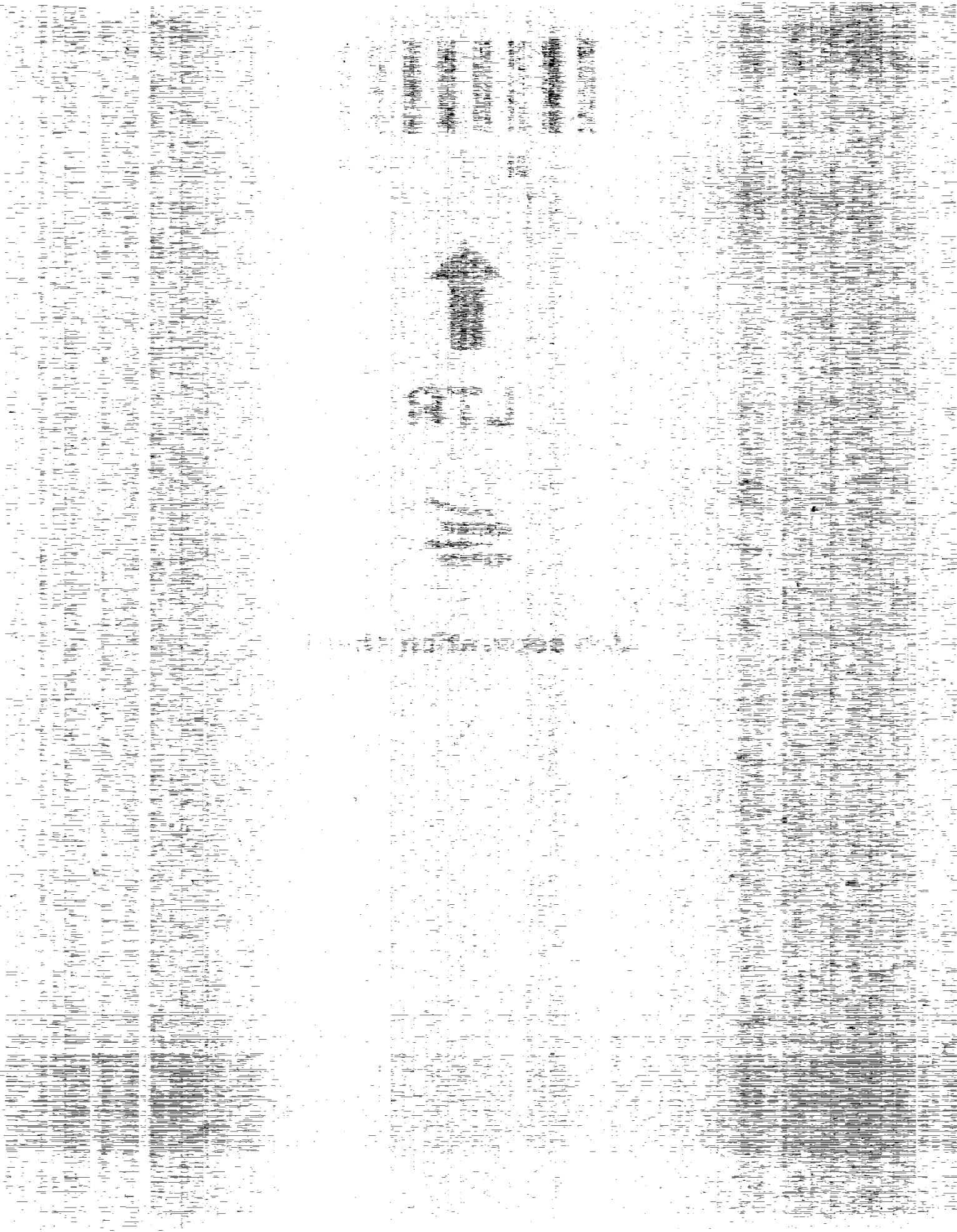


OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY [Signature]  
TITLE SUPERVISION DISTRICT # 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.





District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
P.O Drawer DD, Artesia, NM 88211-0719

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals, & Natural Resources Department

Form C-104  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

☐ AMMENDEED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator Name and Address  Burlington Resources Oil & Gas PO Box 4289 Farmington, NM 87499		<sup>2</sup> OGRID Number  14538
		<sup>3</sup> Reason for Filing Code  CO - 7/11/96
<sup>4</sup> API Number 30-045-20489	<sup>5</sup> Pool Name BLANCO PICTURED CLIFFS (GAS)	<sup>6</sup> Pool Code 72359
<sup>7</sup> Property Code 007645	<sup>8</sup> Property Name WOODRIVER	<sup>9</sup> Well Number #3

II. <sup>10</sup> Surface Location

UI or lot no. E	Section 5	Township 030N	Range 009W	Lot.Idn	Feet from the 1660	North/South Line N	Feet from the 1175	East/West Line W	County SAN JUAN
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<sup>11</sup> Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
<sup>12</sup> Lse Code	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID 7057	<sup>19</sup> Transporter Name and Address EL PASO FIELD SERVICES P.O. BOX 1492 EL PASO, TX 79978	<sup>20</sup> POD	<sup>21</sup> O/G G	<sup>22</sup> POD ULSTR Location and Description E-05-T030N-R009W

IV. Produced Water

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description
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V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBTD	<sup>29</sup> Perforations
<sup>30</sup> Hole Size	<sup>31</sup> Casing & Tubing Size	<sup>32</sup> Depth Set	<sup>33</sup> Sacks Cement	

VI. Well Test Data

<sup>34</sup> Date New Oil	<sup>35</sup> Gas Delivery Date	<sup>36</sup> Test Date	<sup>37</sup> Test Length	<sup>38</sup> Tbg. Pressure	<sup>39</sup> Csg. Pressure
<sup>40</sup> Choke Size	<sup>41</sup> Oil	<sup>42</sup> Water	<sup>43</sup> Gas	<sup>44</sup> AOF	<sup>45</sup> Test Method
<sup>46</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature: <i>Dolores Diaz</i>			OIL CONSERVATION DIVISION  Approved by: Frank T. Chavez		
Printed Name: Dolores Diaz			Title: District Supervisor		
Title: Production Associate			Approved Date: July 11, 1996		
Date: 7/11/96		Phone (505) 326-9700			
<sup>47</sup> If this is a change of operator fill in the OGRID number and name of the previous operator 14538 Meridian Oil Production					
Previous Operator Signature  Signature: <i>Dolores Diaz</i>		Printed Name Dolores Diaz	Title Production Associate	Date 7/11/96	