NO. OF COPIES RECEIVED			ζ	
DISTRIBUTION			Ī	
SANTA FE				
FILE	ΓZ	1:		
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL	'		
HANSPORTER	GAS	$\overline{1}\overline{Z}$		
OPERATOR				
PRORATION OFFICE				

<u> </u>	DISTRIBUTION SANTA FE FILE		NEW MEXICO OIL CO	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
	U.S.G.S. LAND OFFICE I RANSPORTER OIL ' GAS / OPERATOR	AUTHO	DRIZATION TO TRAN	ISPORT OIL AND	NATURAL GAS	i		
1.	Operator El Paso Natural Gas Company							
	Address Box 990, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well	-	n Transporter of:	;				
	Recompletion Change in Ownership	Oil Ca si ngh	Dry Gas ead Gas Condens					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND LE	EASE	Pool Name, Including Fo	rmation	Kind of Lease	Lease No.		
	Lease Name Murphy	2	Aztec Pictured		State, f exeral or			
	Location M 847	F4 P-	om The South Line	and 93 9	Feet From The	West		
	Unit Letter 24 Towns	201			м, San Juan	County		
Ш.	DESIGNATION OF TRANSPORTE	R OF OI	AND NATURAL GAS	S				
	Name of Authorized Transporter of Oil El Paso Natural Gas Co	or	Condensate 🚹	Address Give addres		copy of this form is to be sent) • Mexico 87401		
	Name of Authorized Transporter of Casin	ghead Gas [or Dry Gas 🛣	Address (Give addres	s to which approved	l copy of this form is to be sent)		
	if well produces oil or liquids,	Jnit Se	c. Twp. Rge.	Box 990, Far is gas actually conne	mington Ne	w Mexico 87401		
	If this production is commingled with	that from	any other lease or pool,	give commingling or	ier number:			
17.	Description DATA Description Description		01. ((01.	New Wel. Workove	r Deepen	Plug Back Same Res'v. Diff. Res'v.		
			Ready to Prod.	X Total Depth		P.B.T.D.		
	8-18-70		17-70	2729		2718 Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.) 6152' GL		ed Cliffs	2586		272 9		
	2586 - 2602', 2612 - 20'			Эер		Depth Casing Shoe 2729		
		TUBING, CASING, AND CE						
	HOLE SIZE			136'		85 Sks.		
	6 3/4" 2 7	/8"		2729'		250 Sks.		
V	. TEST DATA AND REQUEST FO	R ALLOW	ABLE (Test must be a	fter recovery of total v	olume of load oil an	nd must be equal to or exceed top allow-		
	Oll. WELL Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					etc.)		
	Length of Test	Tubing Pressure		Casing Pressure		Choke Size		
	Actual Prod. During Test	Oil-Bbls.		Water-Bbls.		Gas-MCF		
	Actual Float Daring		<u></u>					
	GAS WELL					/ ON 101 000 41/		
	Actual Prod. Test-MCF/D	Length of T		Bbls. Condensate/M	MCF	Gravity of Condendate		
	2958 Testing Method (pitot, back pr.)	3 Ho	ssure (Shut-in)	Casing Pressure (S	hut-in)	Choke Size		
	Calculated A. O. F.			★ X 467	CONSERVA	3/4" TION COMMISSION		
V	I. CERTIFICATE OF COMPLIANC	E			A== 0.0 4070			
	I hereby certify that the rules and re	gulations	of the Oil Conservation	APPROVED	APPROVED SEP 2 9 1970 Original Signed by A. R. Kendrick			
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. In Signed F. H. WOOD (Signature) Petroleum Engineer (Title)			THE PETROLEUM ENGINEER DIST, NO. 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.				
				F:31 05	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.			
	(Da	te)		Separate F completed wells	orms C-104 must	be filed for each pool in multiply		