	DISTRIBUTION SANTA FE		(_p								
				NEW MEXICO OIL CONSERVATION COMMISSION Form C-104							
				•			FOR ALLOWABLE		Supersedes Old C-104 and		
	FILE					AND			Effective 1-1-65		
	U.S.G.S.			AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
	TRANSPORTER	OIL									
	- THANS	GAS									
	OPERATOR		<i>F</i>								
1.	PRORATION OFFICE										
	Operator										
	El Paso Natural Gas Company										
	Box 990, Farmington, New Mexico 87401										
	Reason(s) for filing (Check proper box) Other (Flease explanation)										
	New Well Change in Transporter of:										
	Recompletion	\vdash		011	=	Dry Gas	į				
	Change in Ownershi	FL.		Casinghead (Gas 🔝 🤇	Condensate	<u> </u>				
	If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool large, Including Formation Lease Lease Lease										
	Kell	ly B		2	Prodesignat	ted Picture	ed Cliffs	State • eXera : S	ee <u>S. 077</u>	775	
	Location										
	Unit Letter	<u>A</u>	: <u>870</u>		The North			Feet From The			
	Line of Section	ŝ	Towns	ship 30N	Range	, 10	W_{-} , imp	, Sar Ju	an	Co	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Ci or Condensate X Address (Give address to which approved										
	i					1					
	Name of Authorized	Vatural C	as Compar	ay	Lidrage	Box 990	to which approved on	New Mexico 37	41		
)			Gas Compai	ny		Box 990	, Farmington,	New Mexico 37		
	If well produces oil		s,	Init Sec.	Twp. Pg 30N 1	1 .	actually connec	led? Whe:			

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

Date Compl. Ready to Prod.

Name of Producing Formation

7-22-71

Pictured Cliffs

CASING & TUBING SIZE

8 5/8"

2 7/8¹¹

3 Hrs. Tubing Pressure (Shut-in)

Date of Test

Oil-Bbls.

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.

(Signature)

(Title)

(Date)

rrinai Signed F. H. W**noct D. Yan Ryan**

Petroleum Engineer

July 30, 1971

Samuel Signed By:

Tubing Pressure

X

TUBING, CASING, AND CEMENTING RECORD

Total Depth

Top**XX**/Gas Pay

3081'

20541

DEPTH SET

(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)

142'

<u>3031'</u>

IV. COMPLETION DATA

6-1-71

5308' GI

2954 - 80'

12 1/4"

5 3/4"

Date First New Oil Run To Tanks

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

V. TEST DATA AND REQUEST FOR ALLOWABLE

Date Spudded

Perforations

OIL WELL

Length of Test

GAS WELL

Actual Prod. During Test

Actual Prod. Test-MCF/D 1539

Testing Method (pitot, back pr.) Calc. A.O.F. VI. CERTIFICATE OF COMPLIANCE

Designate Type of Completion = (X)

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

> Lease No. S.: 977754-A

> > County

37401 be sent)

-.5.7

3061'

epth Casing Shoe

3081'

90 Sks.

255 Sks.

iking Depth

New Mexico 37401

Ag Back Same Restal Diff, Restv.

Tubingless Comp.

SACKS CEMENT

Producing Method ($Flow,\ pump,\ ga.$	s life etc.)					
daing Pressure	Choke Size					
•	ų.					
/ater-Bbls.						
'ater-Bbls.	Gas-MCF	,				
	· ·					
		• .				
	* <u>*</u>					
bls. Condensate/MMCF	Gravity of Contiens	ıt•				
asing Pressure (Shut-in)	Choke Size					
044	3/4"					
BY Original Signed TITLE						
This form is to be filed If this is a request for a well, this form must be according	in compliance with RU	illed or deepened				
tests taken on the well in ac	corcance with RULE	111.				
All sections of this form able on new and recompleted	wells.					
Fill out only Sections I well name or number, or trans	porter, or other such cha	inge of condition.				
Separate Forms C-104 r	nust be filed for each	pool in multiply				