HO. OF COVIET RECE	15				
DISTRIBUTION					
SANTA FE					
FILE			~		
U.S.G.S.					
LAND OFFICE			Ĺ		
TRANSPORTER	OIL	/			
I RANSFORTER	OIL GAS	1			
OPERATOR					
PRORATION OFFICE			<u> </u>		

	DISTRIBUTION	 		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE			Form C-104		
}	SANTA FE	1-4-					Supersedes Old C-104 and C-110 Effective 1-1-65		
į	FILE	<u> </u>	4	AND					
•	U.S.G.S.	 		AUTHORIZATION TO TRAI	NSPORT OIL AND I	NATURAL GAS			
}	LAND OFFICE	} -							
	TRANSPORTER GAS	/							
	OPERATOR	1							
1.	PRORATION OFFICE								
	El Paso Natural Gas Company Address								
İ	PO Box 990, Farmington, NM 87401 Reason(s) for filing (Check proper tox) Other (Please explain)								
	New Well X Change in Transporter of:								
	Recompletion Oil Dry Gas								
	Change in Ownership Casinghead Gas Condensate								
1	If change of ownership giv	e nar	me				· ·		
	and address of previous ov								
II.	DESCRIPTION OF WEL	l A	<u>ND I</u>	EASE Well No. Pool Name, Including Fo	rmation .	Kind of Lease	Lease No.		
	Atlantic D Com I	7			ed Cliffs Ext.	(State,) Federal or I	- 450 4		
	Location			<u> </u>			-		
	Unit Letter H	. ;	146	O Feet From The North Line	and 800	Feet From The	East		
	Line of Section	2	Tow	nship 30N Range	10W , NMPN	1,	San Juan County		
111.	DESIGNATION OF TRA	NSP	ORT	ER OF OIL AND NATURAL GA	S Actoos (Cine address	to which approved o	opy of this form is to be sent)		
	Name of Authorized Transported Paso Natural	rie: o Gas	6 C01	or Condensate 🛣	PO Box 99	0, Farmingto	on, NM 87401		
	Name of Authorized Transpo				Address (Give address	to which approved o	opy of this form is to be sent)		
	El Paso Natural	Gas	Co		PO Box 990, Farmington, NM 87401 Is gas actually connected? When				
	If well produces oil or liquids, quive location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When 2 30N 10W								
	If this production is comm	ngle	d wit	h that from any other lease or pool,	give commingling orde	r number:	·		
Oil well das note than the same of the sam						ug Back Same Res'v. Diff. Res'v.			
	Designate Type of C	omp	letio	n - (X)	X		1		
	Date Spudded			Date Compl. Ready to Prod.	Total Depth	P.	B.T.D.		
	12-19-72			4-23-73	3369' Top XI/Gas Pay		3358*		
	Elevations (DF, RKB, RT, 6	ations (DF, RKB, RT, GR, etc.) Name of Producing Formation 5552 GL Pictured Cliffs		3274'		tubingless			
	Perforations					De	pth Casing Shoe		
	3274'-3294'						3369'		
				TUBING, CASING, AND	7	· ·	SACKS CEMENT		
	HOLE SIZE			casing a tubing size 8 5/8"	138'	E1	148 cu.ft.		
	12 1/4''						450 cu. ft.		
	6 3/4"			2 7/8"	3369'		430 (11, 11,		
			,	tubingless					
v.	TEST DATA AND REQ	UES	TF	OR ALLOWABLE (Test must be as	fter recovery of total vol pth or be for full 24 hour	ume of load oil and	must be equal to ar exceed top allow-		
	OIL WELL Date First New Oil Run To	Tank	3	Date of Test	Producing Method (Flc	w, pump, gas lift, e	"/or IVFN		
					Casing Pressure		Chove Size		
	Length of Test			Tubing Pressure	Casing		MAY 2 1973		
	Actual Prod. During Test			Oil-Bbls.	Water-Bbls.	G	OIL CON. COM.		
					1.		DIST. 3		
	GAS WELL					- Ta	cavity of Condensate		
	Actual Prod. Test-MCF/D			Length of Test 3 hours	Bbis. Condensate/MMC	J.	avity of condensate		
	Testing Method (pitot, back	pr.)		Tubing Pressure (Shut-is)	Casing Pressure (Shu	t-in) C	noke Size		
	Calc. AOF			tubingless	796		3/4"		
VI.	CERTIFICATE OF CO	MPL	JAN	CE	OIL		ON COMMISSION		
					APPROVED MAY 2 1973 19				
	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.			By Origin	Original Signed by Emery C. Arnold				
				SUPERVISOR DIST. #3					
	Al hon				THE				
					11	for allowabl	a for a newly drilled or deepened		
	11	(Signature)			11 ** ** * ** * * * * * * * * * * * * *	-+ ha eccompanie	i by a tabulation of the deviation ce with RULE 111.		

Petroleum Engineer

April 30, 1973

(Title) (Date)

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.