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-110
Effective 1-1-65

I. Operator

El Paso Natural Gas Company

Address

PO Box 990, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ]
Casinghead Gas [ ]
Dry Gas [ ]
Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Sunray H	5	Blanco Pictured Cliffs Ext.	(State, Fed or Fee) Fee	NM 03195

Unit Letter O : 825 Feet From The South Line and 1500 Feet From The East

Line of Section 11 Township 30N Range 10W NMPM San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND/OR NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company		PO Box 990, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas	or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company		PO Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit O	Sec. 11 Twp. 30N Rge. 10W
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 X	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-5-73	6-25-73	3431'	3421'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6664 GL	Pictured Cliffs	3322'	tubingless

Perforations	Casing Shoe
3322-42' & 3352-72'	3431'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	138'	129 cu.ft.
6 3/4"	2 7/8"	3431'	448 cu.ft.
	tubingless		

V. TEST DATA AND REQUEST FOR ALLOWABLE (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
1790	3 hrs.		

Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Calc. AOF	tubingless	1099	3/4"

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.

OIL CONSERVATION COMMISSION

APPROVED JUL 19

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3