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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-105
Effective 1-1-65

Operator El Paso Natural Gas Company	
Address P.O. Box 990 Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gartner	Well No. 8A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF 080597
Location				
Unit Letter P ; 1035 Feet From The South Line and 875 Feet From The East				
Line of Section 26 Township 30N Range 8W , NMPM, San Juan 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"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 990 Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 990 Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 26	Twp. 30N	Rge. 8W	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	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X	X					
Date Spudded 10-20-77	Date Compl. Ready to Prod. 3-30-78		Total Depth 5550'		P.B.T.D. 5534'			
Elevations (DF, RKB, RT, CR, etc.), 6053' GR	Name of Producing Formation MV		Top Gas /Gas Pay 4404'		Tubing Depth 5512'			
Perforations 4404-12, 4494-98, 4516-20, 4530-36, 4611-30, 4630-50, 4672-94, 4738-46, 4756-74, 4784-98, 4813-20, 4837-59, 4885-97, 4928-38, 4948-54, 4972-82, 4995-5006, 5024-38, 5053-66, 5080-93, 5104-22, 5122-40, 5140-58, 5172-91, 5208-33, 5294-5301, 5312-22, 5358-69, 5390-95, 5405-08, 5430-36, 5512-20.					Depth Casing Shoe 5550'			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		230'		224 cf			
8 3/4"	7"		3348'		914 cf			
6 1/4"	4 1/2" liner		2765-5550'		320 cf			
	2 3/8"		5512		Tubing			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 439	Casing Pressure (Shut-in) 616	Choke Size

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.

A. G. Guiso

(Signature)

Drilling Clerk

(Title)

4-14-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY Original Signature of A. L. Kendrick

TITLE _____

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.