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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator: EL PASO NATURAL GAS CO.

Address: BOX 990, FARMINGTON, NEW MEXICO 87401

Reason(s) for filing (Please check proper box): New Well [X]; Recompletion; Change in Transporter of: Oil; Casinghead Gas; 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 (State, Federal or Fee)	Lease No.
GARTNER	1A	Blanco Mesa Verde	SF	080597

Location: Unit Letter C, 1170 Feet From The North Line and 1840 Feet From The West Line; Section 28, Township 30-N, Range 8-W, NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate: X — Address to which approved copy of this form is to be sent: EL PASO NATURAL GAS CO. BOX 990, FARMINGTON, NEW MEXICO

Name of Authorized Transporter of Casinghead Gas or Dry Gas: X — Address to which approved copy of this form is to be sent: EL PASO NATURAL GAS CO. BOX 990, FARMINGTON, NEW MEXICO

If well produces oil or liquids, give location of tanks: Unit C, Sec. 28, 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	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X				

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9/18/77	10/26/77	5579'	5562'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6191' GR	M.V.	4595'	5336'

Perforations: 4595,4679,4684,4689,4694,4699,4704,4709,4726,4744,4815,4835,4847,
365,4880,5005,5025,5034,5042,5061,5072,5080,5134,5138,5142,5146,5163,5167,
171,5175,5191,5195,5199,5214,5219,5235,5259,5266,5275,5295,5364-73,5390-5400,5411-23,5434-45,
500-16,5526- 34 — Depth Casing Shoe: 5579'

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	404'	345 cf.
8 3/4"	7"	3296'	345 cf.
6 1/4"	4 1/2" liner	3143-5579'	425 cf.
	2 3/8"	5336'	tubing

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)

OIL WELL

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 (pitot, back pr.)	Tubing Pressure (Shut-in) 704	Casing Pressure (Shut-in) 736	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.

D. G. Bruce
(Signature)

Drilling Clerk
(Title)

11/16/77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DIST. 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.

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 multiple