

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Oil Well No. _____
 Gas Well No. _____
 Lease No. _____
 County _____

EL PASO NATURAL GAS CO.

Address: BOX 990, FARMINGTON, NEW MEXICO 87401

Remarks: New Well
 Repair to Transporter of:

If change of name, address, or other information is desired, please advise the Commission.

II. DESCRIPTION OF LEASE

Lease Name	HOWELL M		Section	1A	Tract Name	BLANCO MESA VERDE		Kind of Lease		State, Federal or Tax	NM	Lease No.	012708
Section	N	810	Direction From The	South	Distance	550	Direction To	West					
Block	31	Number of Acres	30-N	Range	8-W	County	San Juan						

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Applicant (Owner, Operator, or Lessee) or Condensate	<input checked="" type="checkbox"/>	Name of Applicant (Owner, Operator, or Lessee) or Dry Gas	<input checked="" type="checkbox"/>	Address to which approved copy of this form is to be sent
EL PASO NATURAL GAS CO.		EL PASO NATURAL GAS CO.		BOX 990, FARMINGTON, NEW MEXICO
EL PASO NATURAL GAS CO.		EL PASO NATURAL GAS CO.		BOX 990, FARMINGTON, NEW MEXICO
If well produces gas, give location of field	N	31	30N	8W

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

IV. COMPLETION DATA

Designation of type of completion -- (X)	Oil Well	Gas Well	Refractured	Workover	Deepen	Final Depth	Time Depth	Diff. Re.	
		X	X						
Date Spudded	7/14/77		Date Compl. Ready to Prod.	9/13/77		Final Depth	5548'	Perfor. Depth	5531'
Elevation of Mouth of Well (feet)	6307' GR		Name of Producing Formation	MV		Perfor. Depth	4546'	Perfor. Depth	5478'
Perforations	4955-78, 5019-36, 5073-97, 5128-62, 5182-98, 5213-21, 5231-37, 5254-62, 5279-95, 5344-54, 5369-77, 5390-99, 5409-17								
	TUBING, CASING, AND CEMENTING RECORD 5453-59, 5472-87								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		BACKS CEMENT				
13 3/4"	9 5/8"		245'		224 cu.ft.				
8 3/4"	7"		3331'		353 cu.ft.				
6 1/4"	4 1/2" liner		3159-5548'		422 cu.ft.				
	2 3/8"		5478'		tbg.				

V. TEST DATA AND RECORDS FOR ALLOWABLE OIL WELL

(Test must be after re completion of load oil and must be equal to or exceed top allowable for this depth or as specified in hours)

Date First New Oil Production	Date of Test	Production (oil flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Choke Size
Actual Prod. During Test	Oil-Gals.	Gas-Mcf

GAS WELL

Actual Prod. Test (Mcf)	Date of Test	Production (oil flow, pump, gas lift, etc.)	Gravity of Gas (lb/cu ft)
Testing Method (pilot, back pit)	Tubing Pressure (Shut-in)	Choke Size (Shut-in)	Choke Size
	790	794	

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. Davis
 Drilling Clerk
 9/28/77

OIL CONSERVATION COMMISSION

APPROVED _____, 1977
 Original Signed by A. R. Kendrick

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviated portions of the well in accordance with RULE 111.
 All sections of this form must be filled out completely for all oil and gas wells 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. Form O.C. 104 must be filed for such changes.