

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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-114  
Effective 1-1-65

I. Operator  
El Paso Natural Gas Company  
Address  
P.O. Box 289, Farmington, New Mexico 87401  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Sunray G Well No. 2A Pool Name, including Formation Blanco Mesa Verde Kind of Lease State, Federal or Fee Lease No. SF 078386A  
Location  
Unit Letter P ; 1050 Feet From The South Line and 900 Feet From The East  
Line of Section 21 Township 31-N Range 9-W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND 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 P.O. Box 289, Farmington, New Mexico 87401  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)  
El Paso Natural Gas Company P.O. Box 289, Farmington, New Mexico 87401  
If well produces oil or liquids, give location of tanks. Unit P Sec. 21 Twp. 31N Rge. 9W Is gas actually connected? When

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.  
Date Spudded 1-8-79 Date Compl. Ready to Prod. 3-26-79 Total Depth 5712' P.B.T.D. 5690'  
Elevations (DF, RKB, RT, GR, etc.) 6178' GL Name of Producing Formation Mesa Verde Top Oil/Gas Pay 4560' Tubing Depth 5656'  
Perforations 4560, 4570, 4782, 4792, 4797, 4818, 4842, 4857, 4865, 4873, 4881, 4889, 4897, 4905, 4920, 4925, 4992, 5002, 5038, 5052, 5097, 5112, 5155, 5161, 5211, 5241, 5261, 5267, 5273, 5279, 5291, 5297, 5303, 5309, 5315, 5321, 5336, 5342, 5348, 5354, 5360, 5379, 5414, 5420\*  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
13 3/4" 9 5/8" 217' 224 cf  
8 3/4" 7" 3387' 719 cf  
6 1/4" 4 1/2" 3206-5712' 419 cf  
2 3/8" 5656' 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  
\*5443, 5489, 5506, 5511, 5541, 5576, 5595, 5666'  
GAS WELL  
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Oil-Gal. COM.  
Testing Method (pitot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size  
297 605

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. Guisco  
(Signature)  
Drilling Clerk  
(Title)  
April 3, 1979  
(Date)

OIL CONSERVATION COMMISSION  
APR 6 1979  
APPROVED  
BY Original Signed by A. R. Kendrick  
SUPERVISOR DIST. 3  
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 multiple