

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-110
Effective 1-1-65

API 30-045-23155

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:		Other (Please explain)
Recompletion	☐	Oil	☐	
Change in Ownership	☐	Casinghead Gas	☐	
		Dry Gas	☐	
		Condensate	☐	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Atlantic C	Well No. 5A (MV)	Pool Name, including Formation Blanco MV	Kind of Lease Federal	Lease No. NM 0607
Location Unit Letter 0 ; 870 Feet From The South Line and 1840 Feet From The East Line of Section 6 Township 30-N Range 10-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, Farmingtn, 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 Sec. Twp. Rge. Is gas actually connected? When
	0 6 30-N 10-W

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded 4-25-79	Date Compl. Ready to Prod. 8-2-79	Total Depth 5513'	P.B.T.D. 5496'					
Elevations (DF, RKB, RT, GR, etc.) 6176' G.L.	Name of Producing Formation Mesa Verde	Top Gas Pay 4821'	Tubing Depth 5453'					
4821, 4865, 4965, 4954, 4966, 4973, 4979, 5053, 5079, 5085, 5091, 5097, 5103, 5109, 5115, 5121, 5127, 5133, 5141, 5161, 5167, 5211, 5229, 5237, 5275, 5289, 5313, 5341, 5361, 5470' w/1 SPZ. TUBING, CASING, AND CEMENTING RECORD			Depth Casing Shoe 5513'					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	216'	224 cf					
8 3/4"	7"	3131'	393 cf					
6 1/4"	4 1/2" liner	3009-5513'	431 cf					
	2 3/8"	5453'	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 5822	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 896	Casing Pressure (Shut-in)	Choke Size 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.


(Signature)
Drilling Clerk
(Title)
August 7, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 20 1979, 19
Original Signed by A. R. Kendrick
BY

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