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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR		2	
<del> </del>		37	T

## NEW MEXICO OIL CONSERVATION COMMISSION

1

Form C-104 110

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1		
	U.S.G.S.	-	AND	Effective 1-1-65		
	LAND OFFICE	_ AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS		
	OIL /					
	TRANSPORTER GAS					
	OPERATOR 2					
I.	PRORATION OFFICE					
	Operator	Commany				
	El Paso Natural Gas Company  Address					
	P. O. Box 990, Farmi	noton New Merrico				
	Reason(s) for filing (Check proper box	<del></del>	1011 (01			
	New Well	Change in Transporter of:	Other (Please explain)			
	Recompletion	Oil Dry G	ins			
	Change in Ownership	<b>=</b>	ensate			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE				
	Lease Name	Well No. Pool Name, Including F		Ecces we		
	Newberry	12(MV) Blanco Mesa	Verde State, Feder	ral or Fee SF 078120-A		
	Location	ho w	0	-		
	Unit Letter H ; 18	40 Feet From The North Li	ne and 800 Feet From	The <b>East</b> ;		
	Line of Section 4 To	wnship 31-N Range	12-W , NMPM, San	Juan County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS Address (Give address to which appr	oved copy of this form is to be sent)		
	El Paso Natural Gas	Company	Box 990, Farmington,	•		
	Name of Authorized Transporter of Ca			oved copy of this form is to be sent)		
	El Paso Natural Cas	Company	Box 990, Farmington,	New Mexico		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen		
	give location of tanks.	H 4 31-N 12W				
		th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.		
	Designate Type of Completi		X 1	Flug Back Same Res-v. Diff. Res-v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	9 <b>-</b> 19-66	11-23-66	<b>728</b> 9	7254		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top XX/Gas Pay	Tubing Depth		
	6034 ' GL	Mesa Verde	48461	5116'		
		67,4877-81,4891-95,4918-		Depth Casing Shoe		
	4964-70,5011-	17,5042-48,5058-64,5080-	86.	7 <b>2</b> 89		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	13 3/4"	/8"	303 '	200		
	8 3/4"	5 1/2"	7289'	144O		
		2 3/8"	7161'			
Į		1 1/4"	5116'	<u> </u>		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load oi. epth or be for full 24 hours)	l and must be equal to or exceed top allow-		
ĺ	OIL WELL  Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	lift, etc.)		
				STITLE !		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Siz		
				Choke 6:23,1966		
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-WCL JCO		
				COIL 3		
				OIL COM. 3		
	GAS WELL					
	Actual Prod. Test-MCF/D 2485 MCF/D	Length of Test  3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate		
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Calculated A.O.F.	454	1016	3/4"		
<b>1</b> 7#			n .			
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION			
	T havely postify that the order and	regulations of the Oil Componenties	APPROVED JAN 6 1957 , 19			
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		By Original Signed by Emery C. Arnold			
above is true and complete to the best of my knowledge and belief.		BY Original Signed by Emery C. Amolo				
			TITLE SUPERVISOR DI	ST. 63		
	Original Signed F. H. WOOD			compliance with RULE 1104.		
		ature;	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			
	Petroleum Engineer	•	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.			
-	(Ti	tle)				
	December 8, 1966		Fill out only Sections I. I	II. III. and VI for changes of owner,		
-	(Date)		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.