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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico (Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Scanlon & Shepard (Company or Operator), Well No. 5, in SE ¼ SE ¼, (Lease)

P (Unit Letter), Sec. 21, T. 20N, R. 9W, NMPM., Chaco Wash-Mesa Verde Pool

San Juan County. Date Spudded 10-3-1961 Date Drilling Completed 10-31-61

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 6405 Total Depth 360 PBTD -

Top Oil/Gas Pay - Name of Prod. Form. -

PRODUCING INTERVAL -

Perforations

Open Hole X Depth Casing Shoe 320 Depth Tubing -

OIL WELL TEST -

Natural Prod. Test: 0 bbls. oil, 0 bbls water in 0 hrs, ___ min. Choke Size ___

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): ___ bbls. oil, ___ bbls water in ___ hrs, ___ min. Choke Size ___

GAS WELL TEST -

Natural Prod. Test: ___ MCF/Day; Hours flowed ___ Choke Size ___

Method of Testing (pitot, back pressure, etc.): ___

Test After Acid or Fracture Treatment: ___ MCF/Day; Hours flowed ___

Choke Size ___ Method of Testing: ___

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Press. ___ Tubing Press. ___ Date first new oil run to tanks ___

Oil Transporter ___

Gas Transporter ___

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
Casing 5½"	320	10

Remarks: This well will be used as a water injection well

RECEIVED JUN 21 1963 OIL CON. COM. DIST. 3

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 21 1963, 19

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title

Scanlon & Shepard (Company or Operator)

By: R. J. Scanlon (Signature)

Title Owner

Send Communications regarding well to:

Name Same

Address