

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~(GAS)~~ - (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 QUADRUPPLICATE 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.

Hobbs, New Mexico January 23, 1958
(Place) (Date)

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

Magnolia Petroleum Company Gardner Federal Well No. 1, in NW 1/4 NW 1/4,
(Company or Operator) (Lease)

D, Sec. 5, T. 23N, R. 37W, NMPM, Undesignated Pictured Cliffs Pool
Unit Letter

Rio Arriba

County. Date Spudded 12-18-57 Date Drilling Completed 1-7-58
Elevation 7685 Total Depth 3470 PBD 3419

Please indicate location:

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

Top ~~Oil~~/Gas Pay 3376 Name of Prod. Form. Undesignated Pictured Cliffs

PRODUCING INTERVAL -

Perforations 3376-3394
Open Hole _____ Depth _____ Casing Shoe 3470' Depth _____ Tubing 3387'

OIL WELL TEST -

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

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8 5/8"</u>	<u>357</u>	<u>200</u>
<u>5 1/2"</u>	<u>3470</u>	<u>150</u>

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

Test After Acid or Fracture Treatment: 1572 MCF/Day; Hours flowed 3

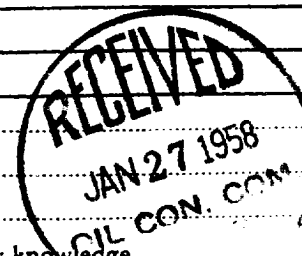
Choke Size 3/4" Method of Testing: Back Pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 18,000 Gal Water & 18,000 # sand
Casing _____ Tubing _____ Date first new _____
Press. _____ Press. 1900 # oil run to tanks _____

Oil Transporter _____

Gas Transporter _____

Remarks: _____



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

Approved JAN 27 1958, 19____ Magnolia Petroleum Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold Title: District Superintendent, Natural Gas
Send Communications regarding well to:

Title Supervisor Dist. # 3

Name Magnolia Petroleum Company

Box 2406

Address Hobbs, New Mexico

OIL CONSERVATION COMMISSION

AZTEC DISTRICT OFFICE

No. Copies Received 4

DISTRIBUTION

	NO. FURNISHED	
Operator	/	
Santa Fe	/	
Proration Office	/	
State Land Office		
U. S. G. S.		
Transporter		
File	/	✓