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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 an 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.

Durango, Colorado
(Place)

Nov. 5, 1962
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS

Socomec Mobil Oil Company, Inc.
(Company or Operator)

Well No. 23-21

NE SW 1/4

(Lease)

K
Unit Letter

Sec. 21

T. 24N

R. 5W

NMPM., Basin Dakota

Pool

Rio Arriba

County. Date Spudded 8/28/62

Date Drilling Completed

9/15/62

Please indicate location:

Elevation KB 6715

Total Depth 6985

FOOD 6982

Top Oil/Gas Pay 6805 - 6748

Name of Produ. Form.

Dakota

PRODUCING INTERVAL -

Perforations (2 Jets) 6805, (2) 6801, (1) 6794, (2) 6788, (2) 6782, (2) 6775,

Open Hole

Depth

6982

Depth

6895

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. 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. 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 0.750 Method of Testing: Back Pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 850 Bbls acid water (2% acid + 5% CaCl2) and 30,000# 20-40 sand

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

Oil Transporter El Paso Natural Gas Co.

Gas Transporter _____

Remarks:

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

Approved NOV 7 1962, 19 _____

Socomec Mobil Oil Company, Inc.
(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO 3

NMOCC 4 Spgs 1 Fmn 1 File 1

By: M. J. Meyer

Title Sr. Prod. Foreman

Send Communications regarding well to:

Name M. J. Meyer

Address P. O. Box 3371, Durango, Colorado

