

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, N.M.

2-1-60

(Place)

(Date)

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

Compass Exploration, Inc.

State

Well No. 1-16

in SW

1/4

SW

1/4

(Company or Operator)

(Lease)

M

Sec. 16

T. 24N

R. 7W

NMPM.

Esquite

Pool

Unit Letter

Rio Arriba

County. Date Spudded 1-4-60

Date Drilling Completed 1-18-60

Elevation 7260

Total Depth 6350

PBDT 6319

Please indicate location:

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

Top Oil/Gas Pay 6070

Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 6070 to 6096

Open Hole None

Depth 6350

Depth 6119

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 load oil used): 480 bbls. oil, 0 bbls water in 24 hrs, _____ min. Size 3/4 Choke

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): 31,660 gal crude 25,000# 20-40 10,000# 100#

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks 1-30-60

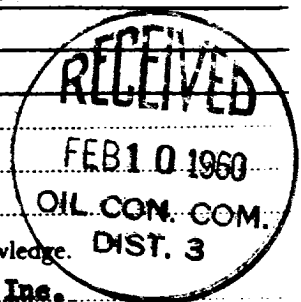
Oil Transporter _____

Gas Transporter McWood Corp.

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9-5/8</u>	<u>265</u>	<u>250</u>
<u>5 1/2</u>	<u>6350</u>	<u>150</u>
<u>2-3/8</u>	<u>6119</u>	

Remarks: _____



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

Approved FEB 10 1960, 19 _____

Compass Exploration, Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Supervisor Dist. # 3

Title _____

By: Original signed by T. A. Dugan
(Signature)

Title Consulting Engineer

Send Communications regarding well to:

Name Compass Exploration Inc.

1645 Court Place
Address Denver, Colorado

FEDERAL BUREAU OF INVESTIGATION

RECORDS MANAGEMENT OFFICE

Copies Received **5**

DISTRIBUTION

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U. S. C. 3.		
Transporter		
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