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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

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.

Farmington, N. M.
(Place)

10-12-61
(Date)

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

Caulkins Oil Company
(Company or Operator)

Brosch A., Well No. PC-133¹⁸³, in NW 1/4 SE 1/4

J Unit Letter, Sec. 10, T. 26 N, R. 6 W, NMPM., South Blanco Pictured Cliffs Pool

Rio Arriba

County. Date Spudded 11-25-51 Date Drilling Completed 12-15-51

Please indicate location:

Elevation 6527 GL Total Depth 3050 PBDT 3050

Top Oil/Gas Pay 2957 Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations

Open Hole 2978 to 3050 Depth 2978 Casing Shoe 2978 Depth 2976 Tubing

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ 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): 10-7-61 Fractured w/ 50000# 10-20 sand and 24779 gal. water

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

Oil Transporter _____

Gas Transporter Southern Union Gas Company

Remarks: No potential test taken following frac. Well is to start deliverability test 10-15-61

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

Approved OCT 18 1961, 19.

Caulkins Oil Company
(Company or Operator)

By: Frank Gray
(Signature)

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title: Superintendent

Send Communications regarding well to:

Title PETROLEUM ENGINEER DIST. NO. 3

Name Frank Gray

STATE OF NEW MEXICO	
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