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PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well

~~Revised~~

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 August 20, 1962
(Place) (Date)

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

Caulkins Oil Company State "A" Well No. MD-62 in NE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

A Unit Letter, Sec. 2, T. 26 N, R. 6 W, NMPM, Blanco Mesa Verde Pool

Rio Arriba County Date Spudded 4-21-62 Date Drilling Completed 5-11-62
Elevation 6668 Total Depth 7735 PBTD 7686

Please indicate location:

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

Top Oil/Gas Pay 4880 Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations 4882 to 5484

Open Hole _____ Depth _____ Casing Shoe 7728 Depth _____ Tubing 5213

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 Choke load oil used): _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

1190 FN&E lines of section Natural Prod. Test: none MCF/Day; Hours flowed _____ Choke Size _____
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>10-3/4"</u>	<u>255</u>	<u>200</u>
<u>5 1/2"</u>	<u>7728</u>	<u>740</u>
<u>2"</u>	<u>7380</u>	
<u>1 1/4"</u>	<u>5213</u>	

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): 120,000# sand and 104,680 gallons water

Casing Press. 1025 Tubing Press. 1025 Date first new oil run to tanks _____

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter Southern Union Gas Company

Remarks: _____

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

Approved: AUG 23 1962, 19____

OIL CONSERVATION COMMISSION

By: A. R. KENDRICK

Title REGIONAL ENGINEER DIST. NO. 3

Caulkins Oil Company

(Company or Operator)

By: Frank Gray (Signature)

Title Superintendent

Send Communications regarding well to:

Name Frank Gray

Box 780 Farmington, New Mexico

