

4-10000
1-Casualty
1-IMP
1-File

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, New Mexico March 18, 1960

(Place)

(Date)

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

Casualty Petroleum Corp.

West

Well No. 1-6

in NE

1/4

NE

1/4

(Company or Operator)

(Lease)

Unit Letter

Rio Arriba

T. 26N

R. 5W

NMPM.

Undesignated

Pool

County. Date Spudded 12-24-59

Date Drilling Completed 2-4-60

Elevation 8543

Total Depth 7600

PBTD 7998

Please indicate location:

Top Oil/Gas Pay 7408

Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 7408-20 7470-80 7509-32 7558-66 7584-94

Open Hole None

Depth

Casing Shoe 7998

Depth

Tubing 7449

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 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
10-3/4	238	175
7-5/8	3400	200
5 1/2	7998	540 on
1 1/2	7449	

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

Test After Acid or Fracture Treatment: 1491 MCF/Day; Hours flowed 3 hrs

Choke Size 3/4" Method of Testing: one point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 50,000 gal water, 50,000 gal oil

Casing Press. _____ Tubing Press. 2905 Date first new oil run to tanks 2-10-60 date of test

Oil Transporter

El Paso Natural Gas Co.

Gas Transporter

CAGP 1569 NEF

Remarks:

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

Approved _____ MAR 21 1960, 19 _____

Casualty Petroleum Corp.

(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed Emery C. Arnold

By: _____

Title Supervisor Dist. # 3

By: _____ (Signature)

Title Consulting Engineer

Send Communications regarding well to:

Casualty Petroleum Corp.

3000 Stockdale Highway

Address Lakewood, California

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
ALBUQUERQUE DISTRICT OFFICE		
NUMBER OF COPIES RECEIVED		4
DISTRIBUTION		
SUPPLIES		
TITLE		
ASSISTANT		
UNIT OFFICE		
TRANSPORTER	OIL	
	GAS	
EXPLORATION OFFICE		
OPERATOR		