

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 December 3, 1962
(Place) (Date)

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

Mountain States Petroleum Corporation, Well No. 1, in NE 1/4, NE 1/4,
(Company or Operator) (Lease)

A, Sec. 19, T. 26N, R. 1E, NMPM, Wildcat Pool
Unit Letter

Rio Arriba

Please indicate location:

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

County. 9-11-62 Date Spudded 9-11-62 Date Drilling Completed 11-8-62
Elevation 7357' Total Depth 4890' PBTD 4600'

Top Oil/Gas Pay 4335' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations

Open Hole 4288-4600 Depth 4288 Depth 4330
Casing Shoe 4288 Tubing

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): 21 bbls. oil, 0 bbls water in 24 hrs, _____ min. Size pump Choke

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9-5/8"</u>	<u>150</u>	<u>75</u>
<u>7"</u>	<u>3275</u>	<u>100</u>
<u>4-1/2"</u>	<u>4288</u>	<u>100</u>
<u>2"</u>	<u>4580</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): Frac treated with 1000 bbls. lease crude oil

Casing 150 Tubing 0 Date first new December 1, 1962
Press. 150 Press. 0 oil run to tanks

Oil Transporter Fonts and Bureau Trucking Co., Inc.

Gas Transporter _____

Remarks: _____

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

Approved DEC 10 1962, 19____

Mountain States Petroleum Corporation

(Company or Operator)

By: Jack A. Cole
(Signature)

Title: Geologist

Send Communications regarding well to:

Name: Mountain States Pet. Corp.

Address: P. O. Box 1741

OIL CONSERVATION COMMISSION

By: Original Signed by W. B. Smith

Title: DEPUTY OIL & GAS INSPECTOR DIST. NO. 3

STATE OF TEXAS	
OIL COMMISSION DISTRICT	
METRIC DISTRICT OFFICE	
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