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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
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
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.

Denver, Colorado.....January 7, 1963
(Place).....(Date)

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

Consolidated Oil & Gas, Inc.....Champlin....., Well No.....2-35....., in.....NW.....¼.....SE.....¼.....
(Company or Operator).....(Lease)
J....., Sec.....35....., T.....27N....., R.....4W....., NMPM., Blanco Mesaverde.....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. Date Spudded.....10/16/62..... Date Drilling Completed.....10/31/62.....
Elevation.....7069 KB..... Total Depth.....6242..... PBD.....6168

Top Oil/Gas Pay.....6026..... Name of Prod. Form.....Mesaverde

PRODUCING INTERVAL -

Perforations.....6026-45',.....6054-76',.....6088-6110',.....6118-28',.....6136-50'
Open Hole..... Depth.....6199..... Depth.....5954
Casing Shoe.....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.....

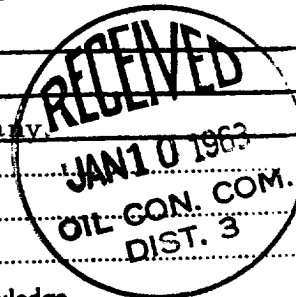
GAS WELL TEST -

Natural Prod. Test:.....MCF/Day; Hours flowed..... Choke Size.....
Method of Testing (pitot, back pressure, etc.):.....
Test After Acid or Fracture Treatment:.....915.....MCF/Day; Hours flowed.....3
Choke Size.....3/4"..... Method of Testing:.....One Point Back Pressure Potential

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):.....77,700 gals. water, 95,000 lb. sand

Casing Press.....Tubing Press.....56..... Date first new oil run to tanks.....
Oil Transporter.....La Mar Trucking, Inc.
Gas Transporter.....El Paso Natural Gas Company

Remarks:.....



I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved.....JAN 10 1963....., 19.....
Consolidated Oil & Gas, Inc.
(Company or Operator)

OIL CONSERVATION COMMISSION

By:.....Original Signed by W. B. Smith.....
Title.....DEPUTY OIL & GAS INSPECTOR DIST. NO. 3.....

By:.....W. H. Williams.....
(Signature)

Title.....Chief Engineer.....
Send Communications regarding well to:
Name.....W. H. Williams.....

Address.....4150 E. Mexico Ave., Denver 22, Colo.