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U.S.G.S.	
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

TRANSPORTER CHANGED FROM SHELL OIL COMPANY TO SHELL PIPE LINE CORPORATION EFFECTIVE 12/31/69

New Well
~~REOPENED~~

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, New Mexico June 25, 1964
(Place) (Date)

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

Caulkins Oil Company Breech "F", Well No. D-11, in NW 1/4 NE 1/4,
(Company or Operator) (Lease)
B, Sec. 35, T. 27 N, R. 6 W, NMPM, Basin Dakota Pool
Unit Letter

Rio Arriba County. Date Spudded 8-9-63 Date Drilling Completed 8-30-63
Elevation 6602 KB Total Depth 7663 PBD 7642

Please indicate location:

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

990 FNL 2310 FEL

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
9-5/8	263	200
4-1/2	7663	650
2-3/8	7397	

Top Oil/Gas Pay 7394 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 7403-18, 7432-40, 7452-56, 7526-42, 7580-92, 7626-38

Open Hole none Depth Casing Shoe 7663 Depth Tubing 7397

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

GAS WELL TEST -

Natural Prod. Test: none MCF/Day; Hours flowed _____ Choke Size _____

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

Test After Acid or Fracture Treatment: 5302 MCF/Day; Hours flowed 3

Choke Size 3/4 Method of Testing: 1 point back pressure

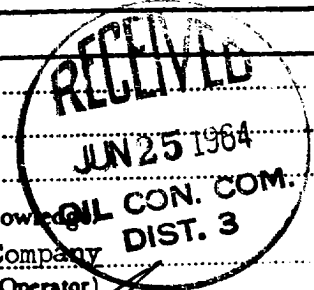
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 178,000# sand and 251,916 gallons water

Casing Press. 2458 Tubing Press. 2456 Date first new oil run to tanks _____

Oil Transporter Shell Oil 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 JUN 25 1964, 19

Caulkins Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

By: Frank O. Gray
(Signature)

Title Superintendent

Name Send Communications regarding well to:
Box 780, Farmington, New Mexico

Address