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NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
~~RENEWABLE~~

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

October 9, 1964

(Place)

(Date)

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

El Paso Natural Gas Company San Juan 27-4 Unit, Well No. 35(PC), in SE 1/4 SW 1/4,

N (Company or Operator) 26, T 27-N, R 4-W, NMPM., Tapacito Pictured Cliffs Pool

Unit Letter
Rio Arriba

County. Date Spudded 7-5-64 Date Drilling Completed 7-15-64
Elevation 7270' G1, 7288' DF Total Depth 6464 C.O. 6434

Please indicate location:

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

1090'S, 1550'W

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
9 5/8"	158	150
7"	4391	175
4 1/2"	2170	200
1 1/4"	4081	tbq.

Top Oil/Gas Pay 4136 (Perf) Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 4136-42; 5182-94

Open Hole None Depth Casing Shoe 6464 Depth Tubing 4091

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 _____

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

Test After Acid or Fracture Treatment: 2237 MCF/Day; Hours flowed 3

Choke Size 3/4 Method of Testing: Calculated A.O.F.

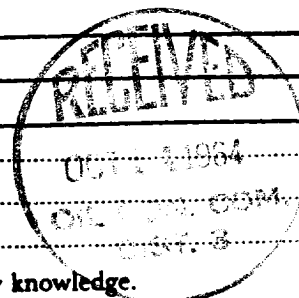
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000 gal water, 40,000# sand

Casing 1051 Tubing 1050 Date first new oil run to tanks

Oil Transporter El Paso Natural Gas Company

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 OCT 14 1964, 19

El Paso Natural Gas Company

(Company or Operator)

By: OR'G'NAL SIGNED E. S. OBERLY

(Signature)

Petroleum Engineer

Title Send Communications regarding well to:
Name E. S. Oberly

Address Box 990, Farmington, New Mexico

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO. 3