

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
~~XXXXXXXXXX~~

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.

August 5, 1959 Farmington, New Mexico
(Place) (Date)

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

El Paso Natural Gas Company San Juan 27-5 Unit Well No. 42(PM), in SW 1/4 SW 1/4,
(Company or Operator) (Lease)

M, Sec. 22, T. 27N, R. 5W, NMPM., Blanco Mesa Verde Pool
Unit Letter
Rio Arriba

Please indicate location:

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

900'S, 900'W

Tubing, Casing and Cementing Record
Size Feet Sax

<u>10 3/4"</u>	<u>161'</u>	<u>180</u>
<u>7 5/8"</u>	<u>3472'</u>	<u>162</u>
<u>5 1/2"</u>	<u>2209'</u>	<u>400</u>
<u>2"</u>	<u>5470'</u>	<u>---</u>
<u>1 1/4"</u>	<u>3376'</u>	<u>---</u>

County. San Juan Date Spudded 5-29-59 Date Drilling Completed 6-12-59
Elevation 6491' Total Depth 5625' ~~XXXXX~~ C.O. 5578'
Top Oil/Gas Pay 5426' (Perf.) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations 5426-5436; 5444-5454; 5476-5486; 5494-5500; 5536-5546
Open Hole None Depth 5622 Depth 5470'
Casing Shoe 5622 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): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

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: 2585 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): 74,700 gallons water & 60,000# sand.

Casing _____ Tubing _____ Date first new
Press. _____ Press. 1115 oil run to tanks

Oil Transporter El Paso Natural Gas Products Co.

Gas Transporter El Paso Natural Gas Company

Remarks: Guiberson "AG" Packer set at 5197'.



I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved: AUG 6 1959, 19____ El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION
Original Signed Emery C. Arnold

By: _____

Title Supervisor Dist. # 3

By: ORIGINAL SIGNED B.M. MEANS
(Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name El Paso Natural Gas Company

Address Box 997, Farmington, New Mexico