

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 April 10, 1959
(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. 41(PM), in NE $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)
K 21, Sec. 21, T. 27N, R. 5W, NMPM., Blanco M.V. Pool
Unit Letter

Rio Arriba

Please indicate location:

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

1650'S, 1650'W

Tubing, Casing and Cementing Record

Size	Feet	Size
10 3/4"	161'	150
7 5/8"	3465'	170
5 1/2"	2266'	305
2"	5453'	---
1 1/4"	3331'	---

County. San Juan Date Spudded 2-19-59 Date Drilling Completed 3-3-59
Elevation 6503' Total Depth 5671' ~~5671'~~ 5622'
Top Oil/Gas Pay 5450' (Perf.) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations 5450-5460; 5470-5480; 5500-5510; 5536-5546

Open Hole None Depth 5666' Casing Shoe 5666' Depth 5453' 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 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: 1848 MCF/Day; Hours flowed 3

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

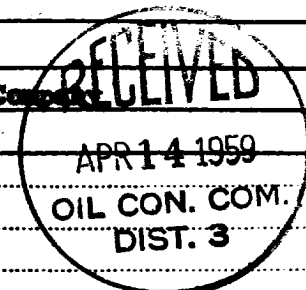
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 72,172 gallons water & 60,000# sand

Casing _____ Tubing 1025 Date first new _____
Press. _____ oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Baker "HJ" rerun packer set at 3454'



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

Approved APR 14 1959, 19____

El Paso Natural Gas Company

(Company or Operator)

By: Original Signed C. D. COX

(Signature)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Title Petroleum Engineer

Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico