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## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

## REQUEST FOR (OIL) - (GAS) ALLOWAPLE

New Well

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 September (Place) (D.   |               |
|--------|-----------|--------------|-------------|--|---------------|
|        |           |              | -           | ING AN ALLOWABLE FOR A WELL KNOWN AS:  | .,            |
|        | Compa     | ov or On     | erator \    | mpany Rincon Unit , Well No. 180 , in SW 1/4 NE.   | ,             |
| G      | e Letter  | , Sec.       | 21          | T 27-N R 6-W NMPM Basin Dakota   | Pool          |
| •      |           |              |             | County Date Spudded 7-31-62 Date Drilling Completed  | 8-22-62       |
|        | Please in |              |             | Elevation 6549 G Total Depth 7643 PB <b>7631</b>   |               |
|        |           |              | <del></del> | Top Oil/Gas Pay 7405 Perf Name of Prod. Form. Dakota   |               |
| D      | C         | В            | A           | PRODUCING INTERVAL - 7405-09;7424-28;7524-28;  |               |
| E      | F         | G            | H           | Perforations 7540-44;7592-98;7612-18;  Depth 7612 Depth  | 76 <b>2</b> 5 |
| _      |           |              |             | Open Hole None Depth Casing Shoe 7642 Tubing   | 1027          |
| L      | K         | X J          | + I         | OIL WELL TEST -  | Choke         |
|        | <b>^</b>  | "            | -           | Natural Prod. Test: bbls.oil, bbls water in hrs, m   | in. Size      |
|        |           |              |             | Test After Acid or Fracture Treatment (after recovery of volume of oil equal to  | volume of     |
| M      | N         | 0            | P           | load oil used):bbls.oil,bbls water inhrs,min.  | Size          |
|        |           | <u> </u>     |             | GAS WELL TEST -  |               |
| 1550   | 'N. 165   | O'E          |             | Natural Prod. Test: MCF/Day; Hours flowed Choke Size   |               |
| Tubing | Casing    | and Come     | nting Reco  | Method of Testing (pitot, back pressure, etc.):  |               |
| Si     | ze        | Feet         | Sax         | Test After Acid or Fracture Treatment: 3147 MCF/Day; Hours flowed  | 3             |
| 9 5/8  | 3"        | 306          | 200         | Choke Size 3/4" Method of Testing: Calculated A.O.F.   | <del></del>   |
| 7/     | <b>*</b>  |              | 200         | Acid or Fracture Treatment (Give amounts of materials used, such as acid, water,   | oil, and      |
| 4 1/2  | 2"        | 7632         | 550         | Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, sand): 80,000 gallons water, 78,000# sand |               |
| 2 3/8  | 3"        | 76 <b>25</b> |             | Casing 2552 Tubing Press. 2272 Date first new oil run to tanks   |               |
|        |           | 1027         |             | Oil Transporter El Pago Natural Cas Products Com OFFE  |               |
|        |           |              | <u> </u>    | Con Transporter F1 Page Natural Clas Company   | FV)           |
| Remar  | ks:       |              |             | SEP 20 19  | 062           |
|        |           |              |             |  | J14.          |
| I      | hereby c  | ertify th    | at the info | ormation given above is true and complete to the best of my knowledge.   |               |
| Approv | ved SE    | PZU          | 1902        | (Company or Operator)  | *******       |
|        |           |              |             | COMMISSION By: ORIGINAL SIGNED H.E. MCANALLY   |               |
|        | OIL (     | CONSE        | RVATION     | COMMISSION By: (Signature)   |               |
| By:    | Origin    | al Sig       | ned by V    | W. B. Smith Title Petroleum Engineer   |               |
| Title  |           |              |             | Send Communications regarding well to: PECTOR DIST NO. 3 Name E. S. Oberly   |               |
|        |           |              |             | Address Box 990, Farmington, New Mexic   | 20            |