NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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 Ma (Place)	xicoSepte	mber171957 (Date)
VE ARE H	EREBY R	EQUESTI	NG AN ALLOWABLE FO	R A WELL KNOWN AS	3:	
(Cor	npany or Op	crator)				
A	Sec	21	, T27N, R6W	, NMPM.,Blanc	Q	Pool
Rio Arr	iba		County. Date Spudded	7-5-57. Date D	rilling Completed	7-19-57
Please indicate location:			Elevation 6546	Total Depth	5655 YOU C	-0-5600
D	C B		-	Perf.) Name of Prod. F		
		x	PRODUCING INTERVAL - 489	L-4900; 4914-4940;	4946-4976; 4989	-4996; 5020-5030
E 1	F G	H		: 5426-5444: 5460-5 Depth	Depth	
_	• "	"	Open Hole None	Casing Shoe	5653 Tubing	<u>5215'</u>
			OIL WELL TEST -			Challa
L	K J	I	Natural Prod. Test:	bbls.oil,bbls	water inhrs,	Choke min. Size
		1		e Treatment (after recovery		
M	N O	P		bls.oil,bbls wat		Choke
			GAS WELL TEST -			
990'N,	990'E	<u> </u>	. Natural Prod. Test:	MCF/Day; Hours	flowedChoke	Size
ubing Cas	ing and Cem	enting Recor	Method of Testing (pitot,	back pressure, etc.):		
Size	Feet	Sax		e Treatment: 5229	MCF/Day; Hours	flowed 3
			7	of Testing: Calcula		•
10 3/4	161	150				
7 5/8	3346	250	Acid or Fracture Treatment	(Give amounts of materials	used, such as acid,	water, oil, and
1 7/1			sand): 73,370 gal.	water and 60.000#	sand, & 78,746	gal water &
5 1/2	2 3 65	300	Casing Tubing Press 10	Date first new oil run to tanks		60,000# sand
2"	521.5			aso Natural Gas Pro		
			Gas Transporter R1 Pago Natural Cas Company			
emarks.						
CIII di k 3	••••••	••••••••••••	•••••		/ 9	
	•••••••	*****************	••••			
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			DED 1 U 7057	El Paso Natural	Gas Compan	7.00
proved			, 19	(Cor	npany or Operator)	05
		n	COMMISSION	By: Original Signe	d D. C. Johnston	
O	L CONSE	KVATION	COMMISSION	Dy	(Signature)	
Origi	nal Sign	ed Emer	y C. Arnold	Title Petroleum En	ngineer	
By: Original Signed Emery C. Arnold Fitle Supervisor Dist. # 3				Send Commu	nications regarding w	ell to:
itle	HAIBOL DIRE	. _# -		Name E. S. Ober	Ly	
				Address Box 997.	Farmington New	Mexico