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NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104)
Santa Fe, New Mexico
Revised 7/1/57

REQUEST FOR OIL (GAS) ALLOWABLE

~~Recompletion~~
Recompletion

This allowable is allocated by the Commission on an initial allowable will be assigned to any completed Oil or Gas well from County to be submitted a **QUALIFICATION** 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 **Sept. 27, 1961**
Place Date

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS

El Paso Natural Gas Co. **San Juan 27-5** Well No. **10** in **NE** $\frac{1}{4}$ **NE** $\frac{1}{4}$.
Company or Operator Lease
A Sec **23** T **27** R **5** N.M.P. **Blanco Mesa Verde** Pool
County Date Spudded Date **Re: Completed** **7-13-61**
Rio Arriba Elevation **6552** Intake well **5735** Well

Please indicate location

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

County Date Spudded Date **Re: Completed** **7-13-61**
Elevation **6552** Intake well **5735** Well
Well No. **5050** Name of well **Mesa Verde**

Depth **5735** Depth **5643**
Casing Casing

Choke
Natural flow test hrs. min. Size
Test volume after recovery of volume of oil equal to volume of
Choke
hrs. min. Size

Choke Size
Mcf/day; hours flowed
Mcf/day; hours flowed

(FOOTAGE)
Casing and Cementing Record

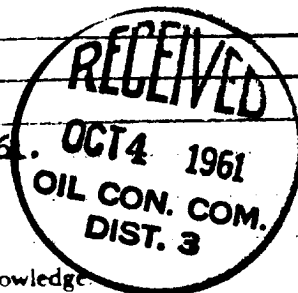
Size	Feet	Sec
9-5/8	165	125
7	3480	250
5-1/2	5735	170
2	5643	

Amount of material used, such as acid, water, oil, and
gas

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gas

El Paso Natural Gas Company

Remarks **An intermitter was installed. Turned back on production 7-15-61.**



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

Approved **OCT 4 1961**

El Paso Natural Gas Co.
Company or Operator

OIL CONSERVATION COMMISSION

By **Original Signed Emery C. Arnold**

Title **Supervisor Dist. # 3**

By **W. C. Adams**
(Signature)

Title **Production Engineer**

Send Communications regarding well to:

Name

Address