

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.

Hobbs, New Mexico

July 29, 1957

(Place)

(Date)

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

Magnolia Petroleum Company **Jicarilla "E"**, Well No. **3 MW**, in **SW** $\frac{1}{4}$ **SW** $\frac{1}{4}$,

(Company or Operator)

(Lease)

H

15

27N

3W

Mesaverte

Pool

Unit Letter

Rio Arriba

County **San Juan** Date Spudded **5-12-57**

Date Drilling Completed **6-13-57**

Elevation **7069** Total Depth **6250** PBTD **6193**

Please indicate location:

Top Oil/Gas Pay **5655** Name of Prod. Form. **Mesaverte**

PRODUCING INTERVAL -

Perforations **5655-6177**

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ 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: **2541** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Back Pressure**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **Sand Wtr Frac w/130,000 gals wtr / 130,000/ sand**

Casing **2200** Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter **Pacific Northwest Pipeline Corporation - Waiting connection.**

Remarks: _____

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

Approved **July 29,** 19**57**

Magnolia Petroleum Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: **Original Signed Emery C. Arnold**

Title **Supervisor Dist. # 3**

By: **Lee E. Arnold**

(Signature)

District Superintendent

Title _____

Send Communications regarding well to:

Name _____

Address _____

RECEIVED

AUG 2 1957

OIL CON. COM.
DIST. 3

OIL CONSERVATION COMMISSION
AZTEC DISTRICT OFFICE

No. Copies Received 4

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