

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 September 18, 1957
(Place) (Date)

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

El Paso Natural Gas Company Rincon Unit , Well No. 85 (FM) , in. SE NE 1/4 1/4,
(Company or Operator) (Lease)
H , Sec. 15 , T. 27N , R. 7W , NMPM, So. Blanco P. C. Ext. Pool
Unit Letter

Rio Arriba

County. San Juan Date Spudded 5-19-57 Date Drilling Completed 5-29-57
Elevation 6746' Total Depth 5760' ~~5720'~~ 5720'
Top Oil/Gas Pay 3278' (Perf.) Name of Prod. Form. Pictured Cliffs

Please indicate location:

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

1650'N, 890' E

PRODUCING INTERVAL -

Perforations 3278-3286; 3304-3326
Open Hole None Depth 5760' Casing Shoe 3455 Depth Tubing 5607'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____
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 _____

Tubing, Casing and Cementing Record

| Size | Feet | Sax |
|---------|-------|-----|
| 10 3/4" | 161' | 125 |
| 7 5/8" | 3445' | 250 |
| 5 1/2" | 2333' | 300 |
| 2" | 5607' | --- |
| 1 1/4" | 3318' | --- |

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 2359 MCF/Day; Hours flowed 3

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

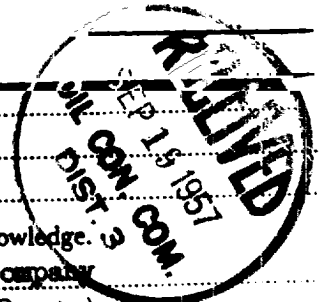
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 52,500 gal. water, and 40,000# sand.

Casing Press. 991 Tubing Press. _____ Date first new oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks: Baker "BJ" Pkr @ 3562', Garrett Sleeve @ 3340'



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

Approved SEP 16 1957, 19____

El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed D. C. Johnson
(Signature)

By: Original Signed Emery C. Arnold

Title Petroleum Engineer
Send Communications regarding well to:

Title Supervisor Dist. # 3

Name E. S. Oberly

Address Box 997, Farmington, New Mexico