

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

~~XXXXX~~
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 November 9, 1961
(Place) (Date)

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

El Paso Natural Gas Company San Juan 28-6 Unit, Well No. 92 (FM), in SW 1/4 NE 1/4,
(Company or Operator) (Lease)
G, Sec. 2, T. 27-N, R. 6-W, NMPM, Blanco Mesa Verde Pool

Rio Arriba County Date Spudded 5-23-59 Date Drilling Completed 6-3-59
Elevation 5462 Total Depth 5623 PBD 5531

Please indicate location:

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

Top Oil/Gas Pay 4900 (Perf) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 4900-14; 5000-14; 5296-06; 5430-40; 5450-60;
Perforations 5472-82; 5512-22;

Open Hole None Depth 5619 Depth 5462
Casing Shoe Tubing

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 load oil used): _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Choke 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: 3997 MCF/Day; Hours flowed 3

Choke Size 3 1/4" Method of Testing: Calculated A.O.F.

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 61,000 gal. water, 50,000 gal. sand, 42,250 gal. water, 40,000 gal. sand

Casing Press. _____ Tubing Press. 1057 Date first new oil run to tanks _____

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

1790 N, 1550 E
(FOOTAGE)
Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	161	165
7 5/8"	3417	130
5 1/2"	2259	400
2 3/8"	5462	
1 1/2"	3284	

Remarks: See Back

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved NOV 13 1961, 19 _____

OIL CONSERVATION COMMISSION
Original Signed By
By: A. R. KENDRICK
Title PETROLEUM ENGINEER DIST. NO. 3

RECEIVED
NOV 13 1961
OIL CON. COM.
El Paso Natural Gas Company DIST. 3
(Company or Operator)
By: Original Signed R. G. MILLER
(Signature)
Title Petroleum Engineer
Send Communications regarding well to:
Name E. S. Oberly
Address Box 990, Farmington, New Mexico