

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 November 4, 1958
(Place) (Date)

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

El Paso Natural Gas Company San Juan 27-4 Unit, Well No. 19 (PM), in NE NE 1/4 1/4,
(Company or Operator) (Lease)

A Sec 5 T 27N R 4W, NMPM., Wildcat P.C. Pool
Unit Letter

Rio Arriba

Please indicate location:

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

915'N, 1020'W

Tubing, Casing and Cementing Record

Size	Feet	Size
10 3/4"	282'	200
7 5/8"	4252'	200
5 1/2"	2228'	300
2"	6335'	---
1 1/4"	4087'	---

County San Juan Date Spudded 6-26-58 Date Drilling Completed 7-29-58
Elevation 7163' Total Depth 6455' ~~xxxx~~ C.O. 6405'
Top Oil/Gas Pay 4074' (Perf.) Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 4074-4100; 4114-4130; 4142-4158

Open Hole None Depth 4262' Depth 4087'
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: 990 MCF/Day; Hours flowed 3

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

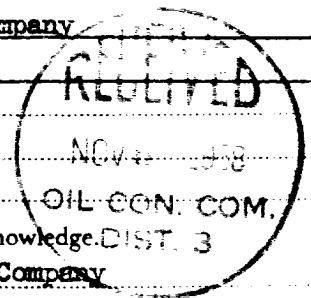
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 45,500 gal. water & 50,000# sand

Casing 967 Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Baker Model "D" packer set at 4201'



I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3
Approved: NOV 6 1958, 19 El Paso Natural Gas Company

(Company or Operator)

Original Signed D. W. Meehan

(Signature)

OIL CONSERVATION COMMISSION

By Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Title Petroleum Engineer

Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>2</u>		
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U. S. G. S.		
Transporter		
File	<u>1</u>	<u>✓</u>