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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
(Place)

July 10, 1961
(Date)

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

El Paso Natural Gas Company (Company or Operator) **Moncrief** (Lease), Well No. **1**, in **S** $\frac{1}{4}$ **E** $\frac{1}{4}$,
P, Sec. **16**, T. **26-N**, R. **11-W**, NMPM, **Basin Dakota** Pool
Unit Letter **San Juan** County. Date Spudded **10-1-60** Date Drilling Completed **10-15-60**
Elevation **6264 G, 6274 DF** Total Depth **6237** PBD **6187**

Please indicate location:

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

790 S, 790 E

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	344	338
4 1/2"	6229	225
2 3/8"	6110	

PRODUCING INTERVAL -

Perforations **6122-6140**

Open Hole **None** Depth **None** Depth Casing Shoe **None** Tubing **None**

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: **3824** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Pitot**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **30,000# sand, 29,735 water**

Casing Press. **600** Tubing Press. **645** Date first new oil run to tanks **2-28-61**

Oil Transporter **El Paso Natural Gas Products Company**

Gas Transporter **El Paso Natural Gas Company**

Remarks: This well was originally drilled by the Texas National Petroleum Company as the Texas National Petroleum Company Moncrief State No. 1. El Paso Natural Gas Co. has purchased this well with the name changed to El Paso Natural Gas Moncrief No. 1. El Paso Natural Gas will be the operator.

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

Approved **JUL 17 1961**, 19

El Paso Natural Gas Company

(Company or Operator)

By: **Original Signed D. W. Meehan**
(Signature)

OIL CONSERVATION COMMISSION

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

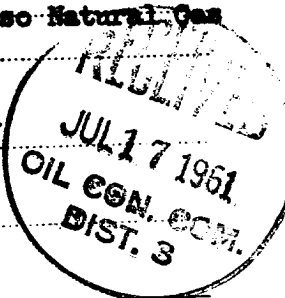
Title **Supervisor Dist. # 3**

Title **Petroleum Engineer**

Send Communications regarding well to:

Name **E. S. Oberly**

Address **Box 990, Farmington, New Mexico**



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