

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

New Well
~~XXXXXXXXXX~~

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 February 25, 1958
(Place) (Date)

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

El Paso Natural Gas Products Co. **Delhi-Taylor**, Well No. **2-B**, in **NW 1/4 NE 1/4**,
(Company or Operator) (Lease)
B, Sec. **12**, T. **26-N**, R. **12-W**, NMPM, **Undesignated** Pool
Unit ~~Lease~~
San Juan

Please indicate location:

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

660'N; 1980'E

Tubing, Casing and Cementing Record
Size Feet Sax

10-3/4"	161	225
5-1/2"	5251	300
2-3/8"	5172	- -

County. Date Spudded **1-5-58** Date Drilling Completed **1-27-58**
Elevation **5991'** Total Depth **5264'** ~~xxx~~ **COTD 5220'**
Top Oil/Gas Pay **5052' Perf.** Name of Prod. Form. **Gallup**
PRODUCING INTERVAL -
Perforations **5052'-5086'; 5182'-5200'**
Open Hole **None** Depth **5264'** Depth **5189'**
Casing Shoe **5264'** Tubing
OIL WELL TEST -
Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
load oil used): **309** bbls. oil, **- -** bbls water in **24** hrs, **- -** min. Size **28/64**
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: _____ MCF/Day; Hours flowed _____
Choke Size _____ Method of Testing: _____
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
sand): **41,420 Gallons Oil & 40,000# Sand - 300 Gals. Mud Acid**
Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks **February 14, 1958**
Oil Transporter **El Paso Natural Gas Products Company**
Gas Transporter **None**

Remarks: _____

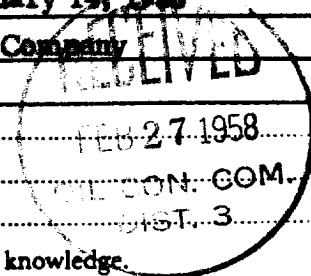
I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved **FEB 27 1958**, 19____

OIL CONSERVATION COMMISSION

By: **Original Signed Emery C. Arnold**
Supervisor Dist. # 3
Title _____

El Paso Natural Gas Products Company
(Company or Operator)
By: *Joseph E. Meyer*
(Signature)
Title **Petroleum Engineer**
Send Communications regarding well to:
Name **Ewell N. Walsh**
Address **Box 1565, Farmington, New Mexico**



OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>5</u>		
DISTRIBUTION		
	No.	
Operator	<u>2</u>	
Sanita Co.	<u>1</u>	
Protraction Co.	<u>1</u>	
State Land Office		
U. S. G. S.		
Transporter		
File	<u>1</u>	☒