

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

~~XXXXXX~~
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.

Midland, Texas

7-20-61

(Place)

(Date)

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

Western Natural Gas Company

Ornard

Well No. 1

in SW 1/4

SW 1/4

(Company or Operator)

(Lease)

M

Sec. 14

T. 27N

R. 8W

NMPM, South Blanco P.C.

Pool

Unit Letter

Recompletion:

San Juan

County. Date Spudded

4-24-61

Date Drilling Completed

5-20-61

Please indicate location:

Elevation

6001 B.F.

Total Depth

4770

PBTD

Top Oil/Gas Pay

2216

Name of Prod. Form.

South Blanco P.C.

PRODUCING INTERVAL -

Perforations 2216-2234 ft.

Open Hole

4373-4770

Depth

4373

Depth

4204

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): _____ 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: _____ MCF/Day; Hours flowed _____

Choke Size 3/4" Method of Testing: Choke nipple

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 500 gals acid; 50,000 gals water - 70,000# sand

Casing _____ Tubing _____ Date first new

Press. _____ Press. _____ oil run to tanks

Oil Transporter

Gas Transporter El Paso Natural Gas Company

Remarks:

DC Order #MC-1079

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

Approved JUL 26 1961, 19

WESTERN NATURAL GAS COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

Paul Woodward
(Signature)

Title Office Manager

Send Communications regarding well to:

Name Western Natural Gas Company

Address 823 Midland Tower, Midland, Texas

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
AZUL DISTRICT OFFICE		
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