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	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

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 September 14, 1962
(Place) (Date)

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

El Paso Natural Gas Company San Juan 28-5, Well No. 55, in NW 1/4 SW 1/4,
(Company or Operator) (Lease)

L Unit Letter, Sec. 23, T. 28-N, R. 5-W, NMPM, Blanco Mesa Verde Pool
Rio Arriba

County. Date Spudded 8-1-62 Date Drilling Completed 8-14-62
Elevation 7988 G Total Depth 6393 PBD 6345

Please indicate location:

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

1800'S, 1020'W

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
9 5/8"	309	200
7"	4177	120
5"	2299	170
2 3/8"	6319	

Top Oil/Gas Pay 5822 (Perf) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 5822-28; 5840-46; 6170-74; 6186-90
6228-32; 6274-78; 6312-18;

Perforations
Open Hole None Depth Casing Shoe 6393 Depth Tubing 6319

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 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: 6330 MCF/Day; Hours flowed 3

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

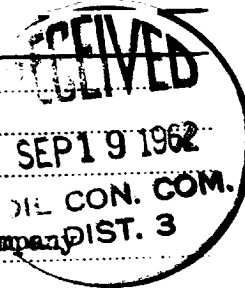
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 73,881 gallons water, 70,000# sand

Casing 1115 Tubing 1116 Date first new oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks:



I hereby certify that the information given above is true and complete to the best of my knowledge. Approved SEP 19 1962, 19. _____
El Paso Natural Gas Company (Company or Operator)

OIL CONSERVATION COMMISSION

By: ORIGINAL SIGNED H.E. McANALLY (Signature)

By: Original Signed by W. B. Smith

Title: Petroleum Engineer

Title: DEPUTY OIL & GAS INSPECTOR DIST. NO. 3

Name: Send Communications regarding well to: E. S. Oberly

Box 990, Farmington, New Mexico