

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.

Denver, Colorado August 8, 1961
(Place) (Date)

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

Compens Exploration, Inc. Basin-Federal, Well No. 1, in NE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

A Sec. 20, T. 27N, R. 13W, NMPM., Basin-Bakota Pool

Unit Letter

San Juan

Please indicate location:

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

County. Date Spudded 12/17/60 Date Drilling Completed 12/31/60

Elevation 2044 G.L. Total Depth 6150 PBD 6135

Top Oil/Gas Pay 5000 Name of Prod. Form. Bakota

PRODUCING INTERVAL -

Perforations 5000 to 6107

Open Hole None Depth 6145 Depth 5098
Casing Shoe 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 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: 2010.6 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: One point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 65,200 gals gel water; 67,500 sand (3 stage free)

Casing 2000 Tubing 2070 Date first new
Press. Press. oil run to tanks

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks: CACF 2000.0

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved AUG 11 1961, 19____

Compens Exploration, Inc. AUG 11 1961
(Company or Operator) EL CON. COM.

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

By: P. J. Farrelly
(Signature)

Title Chief Geologist
Send Communications regarding well to:

Name P. J. Farrelly
101 University Blvd., Denver, Colo.

Address _____

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
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