

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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 QUADRUPPLICATE 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Furnington, New Mexico September 17, 1953

(Place) (Date)

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

~~Chapman Oil Ventures, Inc.~~ Kuts Govt., Well No. 6, in 1/4 NE 1/4, (Company for Operator) (Lease) Sec. 3, T. 27N, R. 10W, NMPM, Kuts-Fulcher Pool (Unit) San Juan County. Date Spudded 8-2-53, Date Completed 9-14-53

Please indicate location:


Elevation 5998 Total Depth 2025, P.B.

Top oil/gas pay 1933 Prod. Form Pictured Cliffs

Casing Perforations: or

Depth to Casing shoe of Prod. String 1936

Natural Prod. Test 300,000 cu. ft. BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential 1120 MCF & 285 S&W R.P.

Size choke in inches.

Date first oil run to tanks or gas to Transmission system: not connected

Transporter taking Oil or Gas: Southern Union Gas Company

not connected, new well.

Remarks:

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

Approved 9-23, 1953

Chapman Oil Ventures, Inc. (Company for Operator)

OIL CONSERVATION COMMISSION  
By: [Signature] Oil and Gas Inspector Dist. #3.  
Title:

By: [Signature] Agent  
Title: Send Communications regarding well to:  
Name: Mr. R. E. Baker  
Address: 701 - Ernest & Cramer Building, Denver, Colo.

OIL CONSERVATION COMMISSION  
AZTEC DISTRICT OFFICE

No. Copies Received **6**

DISTRIBUTION

	NO. FURNISHED	
Operator	<b>3</b>	
Santa Fe	<b>1</b>	
Proration Office	<b>1</b>	
State Land Office		
U. S. G. S.		
Transporter		
File	<b>1</b>	<input checked="" type="checkbox"/>