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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~XXXXX~~ - (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-103 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

July 31, 1961

(Place)

(Date)

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

Artec Oil & Gas Company
(Company or Operator)

Reid

Well No. 23-D, in SW 1/4 1/4.

(Lease)

L 17 28N SW Basin Dakota Pool

Unit Letter

San Juan

County San Juan Date Spudded 6/21/61

Date Drilling Completed 7/9/61

Please indicate location:

Elevation 6228 G.L. Total Depth 6669 PBTD 6635

Top Oil/Gas Pay 6484 Name of Prod. Form. Dakota

PRODUCING INTERVAL --

Perforations 6484-6506, 6581-6596, 6610-6624 with 4 shots per foot

Open Hole _____ Depth _____ Casing Shoe 6635 Depth _____ Tubing 6459

OIL WELL TEST --

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke 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. Choke Size _____

GAS WELL TEST --

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (bitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: ACF - 3563 MCF/Day; Hours flowed 3 hrs.

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

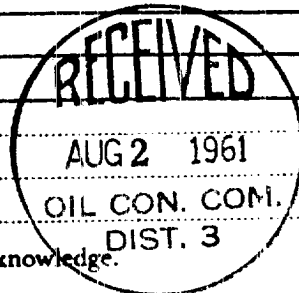
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Placed w/ 55,000# sand, 1330 Bbls. water, flushed w/ 160 Bbls. water

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter Southern Union Gas Company

Remarks: _____



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

Approved July 31 AUG 2 1961, 19 61

Artec Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: ORIGINAL SIGNED BY JOE C. SALMON
(Signature) Joe C. Salmon

By: Original Signed Emery C. Arnold

Title District Superintendent
Send Communications regarding well to:

Title Supervisor Dist. # 3

Name Artec Oil & Gas Company

Address Drawer # 570, Farmington, New Mexico

STATE OF NEW MEX CO		
OIL CONSERVATION COMMISSION		
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