

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 August 6, 1957
(Place) (Date)

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

El Paso Natural Gas Company Lackey, Well No. 10-B (FM), in SW $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

G, Sec. 21, T. 28N, R. 9W, NMPM, Aztec P. C. Ext. Pool
Unit Letter

San Juan County. Date Spudded 3-17-57 Date Drilling Completed 6-13-57

Please indicate location:

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

1750N, 1690E

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	162'	150
7 5/8"	5388'	300
5 1/2"	450'	110
2"	5650'	-

1 1/4" 3231' -

Remarks:

Garrett Sleeve @ 3287; Baker Model "EGJ" Pkr. @ 5401'

Elevation 6992 Total Depth 5748 PBTD 5700

Top Oil/Gas Pay 3238 Name of Prod. Form. P.C.

PRODUCING INTERVAL -

Perforations 3238-3262

Open Hole None Depth None Casing Shoe 5398' Depth 5650' Tubing

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 (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 3187 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): 44,310 gal. water and 40,000# sand.

Casing 696 Tubing 696 Date first new oil run to tanks
Press. 696 Press. 696

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company



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

Approved AUG 8 1957, 19____

El Paso Natural Gas Company
(Company or Operator)

Original Signed D. C. Johnston

By: _____
(Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name E. J. Coal

Address Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

By: Original Signed By
A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO. 3

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>5</u>		
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State Land Office		
U. S. G. S.		
Transporter		
File	<u>1</u>	<input checked="" type="checkbox"/>