

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	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 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Casper, Wyoming

January 5, 1961

(Place)

(Date)

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

The Ohio Oil Company

Ohio Govt. Sec. 15

Well No. 2-15

SE

SE

(Company or Operator)

(Lease)

, in. 1/4 SE 1/4

P

Sec. 15

T. 28N

R. 11W

NMPM., Basin Dakota Pool

Unit Letter

San Juan

County. Date Spudded 10/14/60

Date Drilling Completed 11/8/60

Elevation 5526' KB Total Depth 6225' PBD 6147'

Please indicate location:

Top Oil/Gas Pay 5949' Name of Prod. Form. Dakota

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

890' FSL, 990' FEL

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
10-3/4"	616	400
7-5/8"	1649	475
4-1/2"	6225	200
2-3/8"	6118	

PRODUCING INTERVAL -

Perforations 5949-59', 5970-90', 6022-59', 6100-35'

Open Hole Depth 6224' Casing Shoe Depth 6113' 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: CAOF 6904 MCF/Day; Hours flowed 3

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

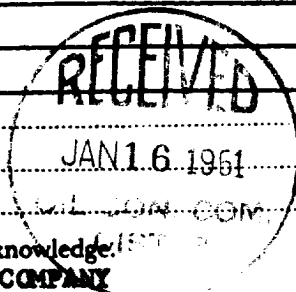
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 120,000' sand in 120,000 gals. water

Casing Press. 2132 Tubing Press. 2048 Date first new oil run to tanks _____

Oil Transporter El Paso Natural Gas Company

Gas Transporter _____

Remarks: Well presently shut in awaiting pipe line connections.



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

Approved JAN 16 1961, 19.....

THE OHIO OIL COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *N. J. Buntch* (Signature)

By: Original Signed Emery C. Arnold

Title: Division Production Superintendent

Title Supervisor Dist. # 3

Name: W. A. Poe

Address: P. O. Box 948, Durango, Colorado

STATE OF NEW MEXICO			
OIL CONSERVATION COMMISSION			
AZTEC DISTRICT OFFICE			
NUMBER OF COPIES RECEIVED		4	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRODUCTION OFFICE			
OPERATOR			