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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

CORRECTED COPY

~~New York~~
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.

Farmington, New Mexico

May 2, 1962

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

El Paso Natural Gas Company San Juan 29-6 Well No. **51-31** in **SE** **SW**
(Company or Operator) (Section) (T) (R) (NMPM) **Blanco Mesa Verde** Pool

N Sec **31** T **29** R **6** NMPM **Blanco Mesa Verde** Pool

Rio Arriba

County Date Spindle

Re: Completed ~~3-25-62~~ **3-25-62**

6585 (GL)

5970

Please indicate location:

5872

Mesa Verde

6012

5970

X

Tubing, Casing, and Cementing Record

9-5/8	199	75
7	3674	150
5	6012	150
2	5970	

Notes: (If any) (If none, check box)

1. (If checked, the well is being recompleted.)

2. (If checked, the well is being abandoned.)

3. (If checked, the well is being plugged.)

4. (If checked, the well is being converted.)

5. (If checked, the well is being tested.)

6. (If checked, the well is being repaired.)

7. (If checked, the well is being abandoned.)

Remarks: **An intermitter was installed. Turned back on production 3-25-62**



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

Approved **MAY 3 1962**

(Signature)

EL PASO NATURAL GAS COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By

John J. Tillerson

(Signature)

Title

Production Engineer

Send Communications regarding well to:

Name

Address

By: **Original Signed Emery C. Arnold**

Title **Supervisor Dist. # 3**