

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,
(Place)

August 6, 1959
(Date)

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

Pacific Northwest Pipeline Corp.-San Juan 29-6 Unit, Well No. 47-28(MD), in NW 1/4 NE 1/4,
(Company or Operator)

B 28, T 29N, R 6W, NMPM, Blanco Mesa Verde Pool
Unit Letter
Rio Arriba

Please indicate location:

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

990'N, 1650'E

Tubing, Casing and Cementing Record

Size	Feet	SAX
13 3/8"	322	330
9 5/8"	3515	1051
7"	3968	1160
5"	513	100
2"	7659	---
1 1/4"	5578	---

County. Date Spudded 3-23-59 Date Drilling Completed 6-3-59
Elevation 6375 Total Depth 7897' PBD 7704

Top Oil/Gas Pay 5034' (Perf.) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 5034-5038; 5047-5056; 5067-5071; 5077-5084; 5099-5114;
5132-5166; 5266-5276; 5286-5294; 5452-5463; 5472-5490; 5497-5516;
Perforations 5520-5524; 5532-5540; 5546-5554; 5568-5574; 5593-5596;
5600-5604 Depth 5578'
Open Hole None Casing Shoe 7442 Tubing 5578'

OIL WELL TEST -

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

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: 9549 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A.C.F.

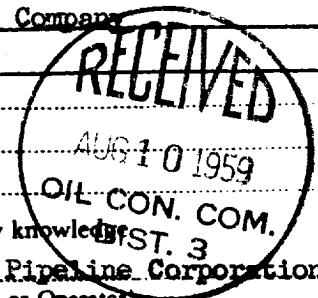
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 80,000 gallons water; 70,000 gal. water

Casing 1043 Tubing 1027 Date first new oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Guiberson "AN" Packer set at 5700'.



I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved _____, 19 _____ AUG 10 1959 Pacific Northwest Pipeline Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

Official Signed Emory C. Arnold

By: _____

Supervisor Dist. # 3

Title _____

OR G NAL SIGNED E. S. OBERLY
(Signature)

Agent

Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

ALBANY DISTRICT OFFICE

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DISPOSITION

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