

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.

Dallas, Texas

September 10, 1958

(Place)

(Date)

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

Southern Union Gas Company

San Juan 29-7 Unit

69

SE

NE

Well No., in. 1/4 1/4,

(Company or Operator)

H, Sec. **29**, T. **29N**, R. **7W**, NMPM., **Blanco Mesaverte** Pool

Unit Letter

Rio Arriba

County. Date Spudded **5-30-58**

Date Drilling Completed **6-15-58**

Please indicate location:

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

Elevation **8135** Total Depth **5935** PBD

Top Oil/Gas Pay **5339** Name of Prod. Form. **Mesaverte**

PRODUCING INTERVAL -

Perforations **5764-5860, 5339-5578**

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing **5935**

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. 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: **11,648** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Multi Point Back Pressure Test**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **5764-5860 w/68,890 gals. water, 100,000# sand; 5339-5578 w/100,000 gals. water, 100,000# sand**

Casing **10384** Tubing **10384** Date first new **100,000 gals. water, 100,000# sand**
Press. _____ Press. _____ oil run to tanks

Oil Transporter _____

Gas Transporter **El Paso Natural Gas Company**

Tubing, Casing and Cementing Record

Size	Feet	Size
10-3/4	187.29	225
7-5/8	3790	200
5-1/2	2496.57	260
2"	5935	

Remarks: _____

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

Approved **SEP 12 1958**, 19 _____

OIL CONSERVATION COMMISSION

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

Title **Supervisor Dist. # 3**

SOUTHERN UNION GAS COMPANY

Original Signed By _____

By: **A. M. WIEDERKEH**

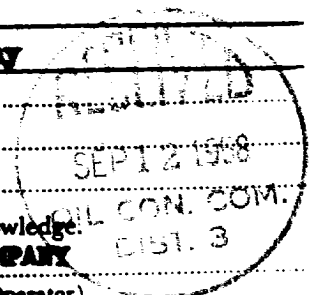
A. M. Wiederkehr (signature)

Title **Mgr., Exploration Department**

Send Communications regarding well to:

Name **A. M. Wiederkehr**

Address **Dart Bldg., Dallas, Texas**



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