

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

~~RECOMPLETION~~
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

8/27/59

(Place)

(Date)

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

El Paso Natural Gas

Dawson

Well No. 1-A, in NE $\frac{1}{4}$ SE $\frac{1}{4}$,

(Company or Operator)

(Lease)

L
Unit Letter

Sec. 17

T. 29

R. 7

NMPM,

Blanco Mesa Verde

Pool

Rio Arriba

County. Date Spudded -

Date Drilling Completed

3/30/59

Please indicate location:

Elevation 6846 G Total Depth 6297 PBD

Top Oil/Gas Pay 5310 Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations Open Hole

Open Hole 5197 - 6297 Depth 5197 Depth 6220
Casing Shoe 5197 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 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: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): _____

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

Oil Transporter _____

Gas Transporter _____

Remarks: To remove accumulating wellbore liquids which were interfering with well productivity, intermitting equipment was installed on the tree. Well brought back to production 1/31/59.

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

Approved SEP 1 1959, 19____

El Paso Natural Gas SEP 1 1959
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

By: _____

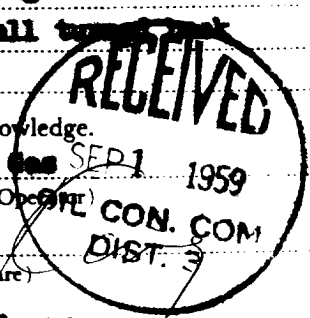
Tony King
Production Engineer

Title _____

Send Communications regarding well to:

Name _____

Address _____



OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>4</u>		
DISTRIBUTION		
	NO. FURNISHED	
Operator	<u>1</u>	
Santa Fe	<u>1</u>	
Production Office	<u>1</u>	
State Land Office		
S. O. S.		
Transporter		
File	<u>1</u>	<input checked="" type="checkbox"/>