

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 June 30, 1958
(Place) (Date)

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

El Paso Natural Gas Company San Juan 30-6 Unit, Well No. 25, in SE 1/4 NE 1/4,
(Company or Operator) (Lease)
H 19, Sec. 30N, T. 30N, R. 6W, NMPM., Blanco Pool
Unit Letter
Rio Arriba

Please indicate location:

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

1750'N, 810'E

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	162'	100
7 5/8"	3501'	200
5 1/2"	2262'	300
2"	5648'	---

County. Date Spudded. 4-28-58 Date Drilling Completed 5-23-58
Elevation 6378 Total Depth 5717' PBID C.O. 5674'
Top Oil/Gas Pay 5202' (Perf.) Name of Prod. Form. Mesa Verde
PRODUCING INTERVAL - 5202-5216; 5224-5242; 5250-5264; 5276-5288; 5340-5354;
Perforations 5408-5422; 5518-5532; 5540-5560; 5578-5604; 5628-5650
Open Hole None Depth Casing Shoe 5714 Depth Tubing 5648

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 load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke 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: 11,628 MCF/Day; Hours flowed 3

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

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 41,700 gal. water & 50,000# sand; 41,600 gal. water & 50,000# sd.

Casing 1097 Tubing 1098 Date first new Press. _____ oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks:

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

Approved JUL 2 1958, 19

El Paso Natural Gas Company

(Company or Operator)

Original Signed D. C. Johnston

By: (Signature)

Petroleum Engineer

Title. Send Communications regarding well to:

E. S. Cberly

Name. Box 997, Farmington, New Mexico
Address.

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title. PETROLEUM ENGINEER DIST. NO. 3