

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 September 20, 1957
(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. 18, in NE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

A 18 30N 6W NMPM, Blanco Pool
Unit Letter

Rio Arriba County. Date Spudded 8-3-57 Date Drilling Completed 8-23-57
Elevation 6417 Total Depth 5810 ~~X~~ C.O. 5770

Please indicate location:

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

920'N, 1020'E

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	162'	150
7 5/8"	3592'	250
5 1/2"	5796'	300
2"	5743'	---

Top Oil/Gas Pay 5276' (Perf.) Name of Prod. Form. Mesa Verde
PRODUCING INTERVAL 5276-5286; 5364-5388; 5560-5576; 5644-5674; 5721-5731;
Perforations 5744-5754
Open Hole None Depth Casing Shoe 5806' Depth Tubing 5743'

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: 7661 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): 100,000 gal. water and 100,000# sand.

Casing Tubing Date first new
Press. 1112 Press. 1112 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 SEP 24 1957, 19____

El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

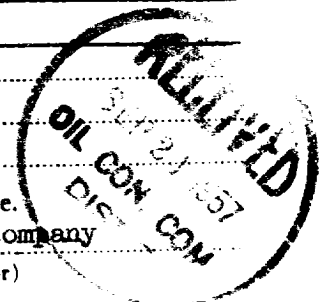
Title Supervisor Dist. # 3

By: Original Signed D. C. Johnston
(Signature)

Title Petroleum Engineer
Send Communications regarding well to:

Name E. S. Eberly

Address Box 997, Farmington, New Mexico



OIL CONSERVATION COMMISSION
AZORES DISTRICT OFFICE
No. C-105-5

10. C. 1971