

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico January 5, 1954
(Place) (Date)

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

El Paso Natural Gas Company Cowell, Well No. 1, in 1/4 SW 1/4,
(Company or Operator) (Lease)
X, Sec. 3, T. 29 N., R. 11 W., NMPM., Aztec Pool
(Unit)
San Juan County. Date Spudded 6-7-53, Date Completed 6-22-53

Please indicate location:

	X		

1650' S, 1650' W

Casing and Cementing Record

Size Feet Sax

<u>9-5/8</u>	<u>122</u>	<u>100</u>
<u>5-1/2</u>	<u>1961</u>	<u>150</u>

Elevation 5686' Jr. Total Depth 2025, P.B.Top oil/gas pay 1X9 Prod. Form Pictured CliffsCasing Perforations: None orDepth to Casing shoe of Prod. String 1271

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential 230 MCF/D

Size choke in inches

Date first oil run to tanks or gas to Transmission system: 7-28-53Transporter taking Oil or Gas: 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 January 5, 1954, 19 54

El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]
(Signature)

By:

Title Petroleum Engineer

Title

Send Communications regarding well to:

Name E. J. CielAddress Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>5</u>		
DISTRIBUTION		
	NO. FURNISHED	
Operator	<u>1</u>	
Santa Fe	<u>1</u>	
Proration Office	<u>1</u>	
State Land Office		
U. S. G. S.		
Transporter		
File	<u>1</u>	<input checked="" type="checkbox"/>