

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
(Place)

12-29-60
(Date)

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

Sunray Mid-Continent Oil Company N.M. Federal "N", Well No. 6, in SW $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

N, Sec. 6, T 30N, R. 12W, NMPM, Basin-Dakota Pool
Unit Letter

San Juan

County. Date Spudded 11-19-60

Date Drilling Completed 12-3-60

Please indicate location:

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

Elevation 5978 Kt Total Depth 6893 PBD 6850

Top Oil/Gas Pay 6660 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6660-66, 6678-86, 6696-6700, 6706-22, 6728-46, 6796-6822'

Open Hole _____ Depth _____ Casing Shoe 6893 Depth _____ Tubing 6650

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: 3088 MCF/Day; Hours flowed 3

Choke Size 1/4 Method of Testing: one point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 500 gal. HCl - 45,500 gal. wtr. & 45,500# sand

Casing _____ Tubing _____ Date first new _____
Press. 740 Press. 864 oil run to tanks _____

Oil Transporter _____

Gas Transporter Southern Union

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8-5/8</u>	<u>361</u>	<u>325</u>
<u>4 1/2</u>	<u>6893</u>	<u>325</u>
<u>2-3/8</u>	<u>6650</u>	

Remarks: _____

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

Approved December 29 DEC 30 1960, 19 60

Sunray Mid-Continent Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emory C. Arnoff

Title Supervisor Dist. # 3

By: Hel M. Shierwalt
(Signature)

Title Engineer

Send Communications regarding well to:

Name Sunray Mid-Continent Oil Company

Address 166 Petroleum Center Bldg., Farmington, N.M.

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
ALBUQUERQUE OFFICE		
NUMBER OF COPIES RECEIVED		4
DISTRICT		
SANTA FE		
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U.S.G.S.		
LAND OFFICE		
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	GAS	
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OPERATOR		