

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 5, 1961**
(Place) (Date)

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

La Plata Gathering System, Inc. San Juan 32-5 Unit, Well No. **1-27**, in **NE** $\frac{1}{4}$ **NE** $\frac{1}{4}$,
(Company or Operator) (Lease)

Unit A, Sec. **27**, T. **32-N**, R. **6-W**, NMPM, **Basin Dakota** Pool
Unit Letter

Rio Arriba County. Date Spudded **June 20, 1961** Date Drilling Completed **July 28, 1961**

Please indicate location:

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

Elevation **6,151** Total Depth **7,895** PBTD

Top Oil/Gas Pay **7,666** Name of Prod. Form. **Dakota**

PRODUCING INTERVAL -

Perforations **7812-7792; 7754-7732; 7666-7688**

Open Hole _____ Depth _____ Depth
Casing Shoe _____ Tubing **7,645**

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 Choke 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: **1,234** MCF/Day; Hours flowed **3**

Choke Size **.75** Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **60,500 gallons water - 54,000# sand.**

Casing _____ Tubing _____ Date first new
Press. **2,592** Press. **2,592** oil run to tanks **Not an oil well**

Oil Transporter _____

Gas Transporter **El Paso Natural Gas Company Will be**

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	562	350
5-1/2	7,895	350
2-3/8	7,645	None
Tubing		

Remarks: **Well Shut in awaiting pipe line connection**

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

Approved: **SEP 8 1961**, 19____

La Plata Gathering System, Inc.
(Company or Operator)

By: _____
(Signature)

Title **C. Beeson Neal, Agent in Farmington**
Send Communications regarding well to:

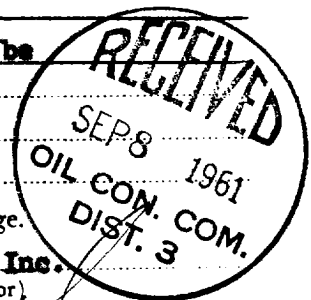
Name **C. Beeson Neal**

Address **Box 728**
Farmington, New Mexico

OIL CONSERVATION COMMISSION

By: **Original Signed Emery C. Arnold**

Title **Supervisor Dist. # 3**



STATE OF NEW MEXICO		
OIL REGISTRATION COMMISSION		
DISTRICT OFFICE		
NUMBER OF REGS RECEIVED		4
DATE		
SURV. FE.		1
REG.		1
TRANS.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
REGISTRATION OFFICE		1
OPERATOR		1