

**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

**REQUEST FOR (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 February 13, 1958**

(Place) (Date)

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

**El Paso Natural Gas Products Company Chimney Rock**, Well No. **2**, in **NE**  $\frac{1}{4}$  **NE**  $\frac{1}{4}$ ,

(Company or Operator)

**A**

Sec. **15**

T. **31-N**

(Lease)

R. **17-W**

NMPM.,

**Undesignated**

Pool

Unit Letter

**San Juan**

County. Date Spudded **12-4-57**

Date Drilling Completed **12-6-57**

Please indicate location:

Elevation **5251'** Total Depth **948'** ~~XXX~~ **CORD 901'**

Top Oil/Gas Pay **876' perf.** Name of Prod. Form. **Gallup**

PRODUCING INTERVAL -

Perforations **876' - 890'**

Open Hole **None** Depth Casing Shoe **948'** Depth Tubing **890'**

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls, oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. 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. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: **2,480 AOF** MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): **4 point back pressure test**

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **None**

Casing Tubing Date first new Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks

Oil Transporter

Gas Transporter **Southern Union Gas Company**

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
<b>8-5/8"</b>	<b>117</b>	<b>100</b>
<b>5-1/2"</b>	<b>941</b>	<b>100</b>
<b>1-1/4"</b>	<b>890</b>	

Remarks:

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

Approved \_\_\_\_\_ FEB 14 1958, 19\_\_\_\_

**El Paso Natural Gas Products Company**

(Company or Operator)

By: *Joseph E. Meyer*

(Signature)

Title **Petroleum Engineer**

Send Communications regarding well to:

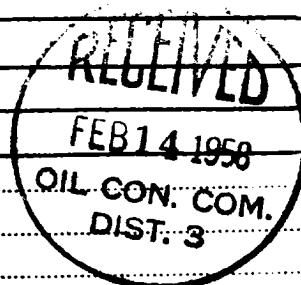
Name **Ewell N. Walsh**

Address **Box 1565, Farmington, New Mexico**

**OIL CONSERVATION COMMISSION**

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

Title **Supervisor Dist. # 3**



AZTEC DISTRICT OFFICE  
 No. 5000

12. Copies Furnished

### Discussion



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7. *Phragmites australis* (Cav.) Trin. ex Steud.

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