

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57REQUEST 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 QUADRUPPLICATE 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 March 30, 1960

(Place)

(Date)

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

El Paso Natural Gas Products Company Horseshoe Ute, Well No. 39, in NW 1/4 NE 1/4,

(Company or Operator)

(Lease)

B

Sec. 28

T. 31N

R. 16W

NMPM.

Horseshoe Gallup

Pool

Unit Letter

San Juan

Please indicate location:

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

660'N & 1980'E

Tubing, Casing and Cementing Record

Size	Feet	Sax
9-5/8"	107	125
5-1/2"	1708	100
2-3/8"	1648'	- -

Remarks: Sandoil fracked perfs. (1632' - 1654') with 55,860 gals. oil and 100,000# sand. Flushed with 1680 gals. oil. Spotted 200 gals. mud acid ahead of frack job.

County. Date Spudded March 4, 1960 Date Drilling Completed March 9, 1960
Elevation 5742' G.L. Total Depth 1717' ~~XXXX~~ COTD 1672'

Top Oil/Gas Pay 1632' (Perfs.) Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1632' - 1654' 2 shots/foot

Open Hole None Depth Casing Shoe 1716' Depth Tubing 1664'

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 load oil used): 24 bbls. oil, No bbls water in 24 hrs, - min. Size -- Choke --

GAS WELL TEST - Pumping 14 spm -- 26" stroke.

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

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): See Remarks

Casing Tubing Date first new
Press. _____ Press. _____ oil run to tanks March 27, 1960

Oil Transporter El Paso Products Pipeline Company

Gas Transporter None

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

Approved: MAR 31 1960, 19

El Paso Natural Gas Products Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title: Supervisor Dist. # 3

By: ORIGINAL SIGNED BY: JOHN J. STRUBIK

(Signature)

Title: Petroleum Engineer

Send Communications regarding well to:

Name: Ewell N. Walsh

Address: Box 1565, Farmington, New Mexico

MAR 31 1960

OIL CON. COM.
DIST. 3

LOCAL GOVERNMENTAL COMMISSION		
OFFICE		
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	2	
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	1	
	1	✓

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