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OPERATOR	1	

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.

Durango, Colorado (Place) September 26, 1960 (Date)

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

Socony Mobil Oil Company, Inc. (Company or Operator) Navajo "A" (Lease), Well No. 22, SE ¼ NW ¼,

F (Unit Letter), Sec. 14, T. 31N, R. 17W, NMPM., Horseshoe Gallup Pool

San Juan Co. County. Date Spudded 8/18/60 Date Drilling Completed 8/24/60

Elevation 5404' KB Total Depth 1107' PBTD 1080

Top Oil/Gas Pay 1030' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations Fracnotch @ 1045

Open Hole ____ Depth Casing Shoe 1107' Depth Tubing 1060'

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): 20 bbls.oil, 0 bbls water in 24 hrs, ____ min. Size 2" Choke

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: ____ 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): Frac w/8000 gals crude & 16000# 10/20 sd.

Casing Press. ____ Tubing Press. ____ Date first new oil run to tanks 9/9/60

Oil Transporter El Paso Natural Gas Products Co.

Gas Transporter Flared

Please indicate location:

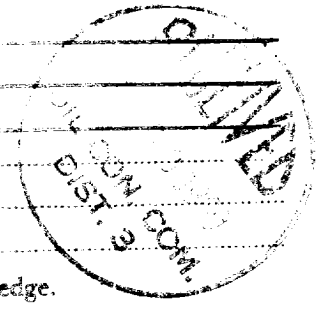
D	C 1652	B	A
E 1827	F	G	H
L	K	J	I
M	N	O	P

1652' fr N line 1827' fr W line
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8"	105'	90
5-1/2"	1107'	100
2"	1060'	Tubing

Remarks: 14 24" SPM 43° API 13,700/1 GOR



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

Approved SEP 30 1960, 19____

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Socony Mobil Oil Company, Inc.
(Company or Operator)

By: P. M. Barry (Signature) P. M. Barry

Title Dist. Prod. Supt.

Send Communications regarding well to:

Name Mobil Oil Company

Address P. O. Box 3371, Durango, Colorado