

## NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57REQUEST FOR ~~ONLY~~ - (GAS) ALLOWABLE~~Workover~~  
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.

~~Aztec, New Mexico~~ ..... ~~October 4, 1962~~ .....  
(Place) (Date)

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

~~PUBCO PETROLEUM CORP.~~ ..... State ~~NE~~ Well No. ~~9~~ in ~~NE~~ ~~1/4~~ ~~NE~~ ~~1/4~~,  
(Company or Operator) (Lease)

~~San Juan~~ ..... Sec. ~~36~~ T. ~~32 North R. 11 West~~ NMPM. ~~Blanco~~ Pool  
Unit Letter Workover: ~~9-23-62~~ 10-1-62

County Date Spudded ~~6-14-53~~ Date Drilling Completed ~~7-12-53~~

Please indicate location:

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

Elevation ~~5189~~ Total Depth ~~5410~~ PBTD ~~5370~~

Top Oil/Gas Pay ~~4782~~ Name of Prod. Form. ~~Mesaverte~~

PRODUCING INTERVAL - ~~Cliffhouse: 4782-4882.~~  
Point Lookout: ~~5102-18, 5124-44, 5206-20, 5234-5322, 5344-64.~~

Perforations \_\_\_\_\_  
Open Hole ~~None~~ Depth ~~5408~~ Casing Shoe ~~Liner~~ Depth ~~5342 KB~~ Tubing

## 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): \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_ Choke

## GAS WELL TEST -

Test before frac: "D" is 362, "Q" is 299, P<sub>c</sub> 813

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

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

Test After Acid or Fracture Treatment: ~~1500~~ MCF/Day; Hours flowed ~~24~~

Choke Size ~~Open~~ Method of Testing: ~~Meter chart~~

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): ~~Cliffhouse: 42,000 gals and 50,000#; sanded out~~  
Pt. Lookout: ~~75,000 gals and 80,000 #.~~

Casing ~~540~~ Press. ~~510~~ Date first new oil run to tanks ~~10-2-62~~

Oil Transporter ~~Plataon, Inc.~~

Gas Transporter ~~El Paso Natural Gas Company~~

## Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4	195	150
7"	4690	250
5"	4606-5408	250
2"	5342	100

Remarks: ~~This well is on test for new allowable after workover. It is requested that the new allowable be effective 10-2-62 as the date of first delivery after workover.~~

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

Approved: \_\_\_\_\_, 19\_\_\_\_\_

OIL CONSERVATION COMMISSION

By: ~~Original Signed by W. B. Smith~~

Title ~~DEPUTY OIL & GAS INSPECTOR DIST. NO. 3~~

**RECEIVED**  
OCT 5 1962  
By: ~~M. P. Maxwell, Jr.~~ (Signature)  
Title: ~~Mgr. Prod. Dept.~~  
Send Communications regarding well to:

Name: ~~MAXWELL~~ ~~H. E. Maxwell, Jr.~~

Address: ~~Box P, Aztec, New Mexico~~

NAME		
DATE		
TIME		
LOCATION		
TRACER	5	
OPERATOR	3	✓