

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 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.

Roswell, New Mexico

12-24-64

(Place)

(Date)

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

The Atlantic Refining Company Mona Federal, Well No. 1, in SW 1/4 SE 1/4,
(Company or Operator) Sec. 17, T. 8S, R. 33E, Tobac-Pennsylvanian Pool

Unit Letter
Chaves

County Date Spudded 11-20-64 Date Drilling Completed 12-18-64

Please indicate location:

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

660° FSL 1980° FEL

Elevation 4403' DR Total Depth 9027' PBTD 8892'
Top Oil/Gas Pay 8923' Name of Prod. Form. Penn-Bough "C"

PRODUCING INTERVAL -

Perforations 8923-27 & 8935-41 w/ 2 JSFF

Open Hole None Depth 9025.61' Depth 8845.47'
Casing Shoe Tubing

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 load oil used): 242 bbls. oil, 0 bbls water in 15 hrs, 0 min. Choke Size 18/64

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	SAX
13 3/8	379.60	385
8 5/8	3581	1750
4 1/2	9014.61	250
2 3/8	8835	

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): 500 gallons 15 Breakdown acid

Casing Packer Tubing 600 Date first new 12/22/64
Press. _____ Press. _____ oil run to tanks

Oil Transporter Peruvian Corp.

Gas Transporter Vented temporarily pending connection

Remarks:

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

Approved: _____, 19_____

The Atlantic Refining Company

(Company or Operator)

By: *O. D. Branches* O. D. Branches
(Signature)

Title: District Drilling Supervisor

Send Communications regarding well to:

A. D. Kloxin

Name: _____

Address: P. O. Box 1978, Roswell, New Mexico

OIL CONSERVATION COMMISSION

By: _____

Title: _____