

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.

Farmington, New Mexico
(Place)

March 31, 1959
(Date)

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

El Paso Natural Gas Company (Company or Operator) Federal (Lease), Well No. 10C, in NW $\frac{1}{4}$ NW $\frac{1}{4}$,
D, Sec. 10, T. 25N, R. 2W, NMPM., Gavalin P. C. Ext. Pool
Rio Arriba Unit Letter

County. Date Spudded 8-20-57 Date Drilling Completed 8-25-57

Please indicate location:

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

835'N, 850'W

Tubing, Casing and Cementing Record

| Size | Feet | S&W |
|---------|-------|-----|
| 10 3/4" | 65' | 100 |
| 5 1/2" | 3730' | 150 |
| 2" | 3700' | --- |

Elevation 7449' Total Depth 3730' PBD

Top Oil/Gas Pay 3639' (Perf.) Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 3639-3649; 3678-3686; 3695-3712

Open Hole None Depth Casing Shoe 3730' Depth Tubing 3700'

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 Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

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: 1893 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): 60,000 gal. water & 60,000# sand.

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: This well was originally drilled by San Juan Gas Corporation as the Federal No. 10-C. El Paso Natural Gas Co. has purchased this well with name changed to the El Paso Natural Gas Co. Federal No. 10-C. El Paso Natural gas Co. will be the operator.

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

Approved 1-3-1959, 19____

El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. CONNOR

Title PETROLEUM ENGINEER DIST. NO. 3

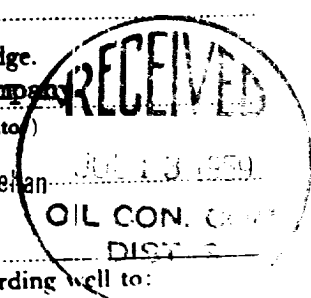
By: Original Signed D. W. Meek
(Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico



ATTN: DIRECTOR OFFICE

No. 00000

1940

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| Transporter | |
|-------------|--|

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| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 |
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2010-10-10