

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.

Farmington, New Mexico 10-4-57
(Place) (Date)

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

Pacific Northwest Pipeline San Juan 29-5, Well No. 30-28, in NW $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

L, Sec. 28, T. 29 N, R. 5 W, NMPM., Blanco Mesa Verde Pool
Unit Letter

Rio Arriba County. Date Spudded 6-5-57 Date Drilling Completed 7-8-57

Please indicate location:

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

Elevation 6697 Total Depth 6030 PBD 6026

Top Oil/Gas Pay _____ Name of Prod. Form. _____

PRODUCING INTERVAL -

Perforations 5486-5944
Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing 5932

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

GAS WELL TEST -

Natural Prod. Test: 204 MCF/Day; Hours flowed _____ Choke Size _____

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

Test After Acid or Fracture Treatment: 1,991 MCF/Day; Hours flowed 3 hours

Choke Size 3/4" Method of Testing: 7,585 MCF/A GAOF

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 120,000 gallons water

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

Oil Transporter _____

Gas Transporter Pacific Northwest Pipeline Corporation

Remarks: Burns liner hanger at 3805'.

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

Approved Oct 7, 1957, 19____

Pacific Northwest Pipeline Corporation

(Company or Operator)

Original signed by G. H. Peppin

By: _____ (Signature)

OIL CONSERVATION COMMISSION

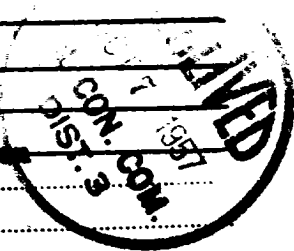
By: Original Signed Emery C. Arnold

Title: District Production Engineer
Send Communications regarding well to:

Title Supervisor Dist. # 3

Name: Pacific Northwest Pipeline Corporation

Address: 405 1/2 West Broadway, Farmington, N.M.



322 EC 100-100, OFFICE

CONFIDENTIAL

100-443887-100

Prisoner

1. The first step is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

Transporter

File	1	✓
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