

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, N.M. 9/30/57
(Place) (Date)

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

El Paso Natural Gas Company Howell, Well No. 1-C, in NW 1/4 NE 1/4,
(Company or Operator) (Lease)
B, Sec. 1, T. 29, R. 8, NMPM, Blanco Pool
Unit Letter
San Juan County. Date Spudded 6-8-51 Date Drilling Completed 8-10-51
Elevation 6083 Total Depth 5260 PBD

Please indicate location:

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

Top Oil/Gas Pay 4593 Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations
Open Hole 4510 to 5260 Depth Casing Shoe 4510 Depth Tubing 5208

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 _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8"	303	200
7"	4510	300
2"	5208	

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

Test After Acid or ~~Fracture~~ Shot Treatment: 4500 MCF/Day; Hours flowed 6

Choke Size _____ Method of Testing: Pitot

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

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

Oil Transporter _____

Gas Transporter El Paso Natural Gas

Remarks: The tubing was perforated opposite the Cliff House zones at 4668, 4667, 4666, with one shot per ft. and at 4608, 4607 and 4606 with one shot per ft., because the hole was bridged in the Menafee. The well was returned to production status 9/25/57.

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

Approved OCT 1 1957, 19 _____ El Paso Natural Gas Company (Company or Operator)

OIL CONSERVATION COMMISSION

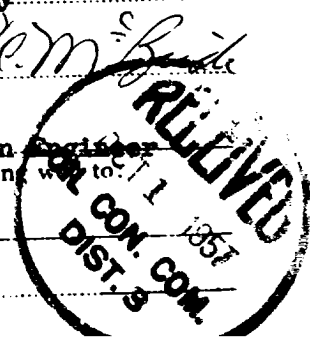
By: Original Signed Emery C. Arnold
Title Supervisor Dist. # 3

By: K. G. McBride (Signature)

Title District Production Engineer
Send Communications regarding well to: _____

Name _____

Address _____



OIL CONSERVATION COMMISSION	
APPLICATION FOR SERVICE	
REG. NO.	4
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
TRANSPORTER	
FILE	<input checked="" type="checkbox"/>