

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

9-10-57

(Place)

(Date)

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

El Paso Natural Gas Company

Abraham

Well No. 2-X

in SW

1/4

SW

1/4

(Company or Operator)

(Lease)

M

Sec. 12

T. 30N

R. 6W

NMPM., Blanco

Pool

Unit Letter

Rio Arriba

County. Date Spudded 5-28-57

Date Drilling Completed 6-20-57

Elevation 6208 (G)

Total Depth 5590 ~~1000~~ C.O. 5520

Top Oil/Gas Pay 5090 (Perf) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 5090-5108, 5186-5209, 5330-5350, 5372-5390,

Perforations 5406-5426, 5444-5456; 5468-5478; 5480-5504

Open Hole None Depth 5587 Depth 5515

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. 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: _____ MCF/Day; Hours flowed _____ Choke Size _____

Ch. Vol. = 4180 MCF/D

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

Test After Acid or Fracture Treatment: 6650 MCF/Day; Hours flowed 3

Choke Size 3/4 Method of Testing: Calculated A. O. F.

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 115,000 gal. water, 97,000# sand.

Casing 1171 Tubing 1164 Date first new oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks: _____

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

Approved: _____ SEP 12 1957, 19 _____

El Paso Natural Gas Company

(Company or Operator)

Original Signed D. C. Johnston

By: _____ (Signature)

Title Petroleum Engineer

Send Communications regarding well to:

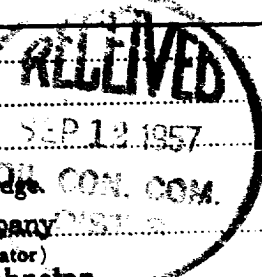
Name E. J. Coal

Address Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3



OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received	3	
DISTRICT OFFICE		
Operator	2	
Santa Fe	1	
Peroration Office	1	
State Land Office		
U. S. G. S.		
Transporter		
File	1	✓