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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

~~XXXXXXXX~~
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 December 9, 1963
(Place) (Date)

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

El Paso Natural Gas Company Riddle Well No. 2 (OWWO) in NW 1/4 SW 1/4,
(Company or Operator) (Lease)
L 30N T 30N R 9W NMPM Blanco Mesa Verde Pool
Unit Letter Workover 10-25-63 Workover
San Juan Date Spudded 5-20-63 Date Completed 11-17-63

Please indicate location:

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

1650'S, 990'W

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
9 5/8	161	125
7"	4497	300
4 1/2	5242	162
2 3/8	5071	

Elevation: 6047' GL, 6057' DF Total Depth 5252 corrod 5186
Top Gas Pay 4590 (Perfs) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL -

Perforations 4590-4608, 4650-68, 5065-70, 5079-89, 5103-08, 5155-60

Open Hole None Depth Casing Shoe 5252 Depth Tubing 5081

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: 9981 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): 61,550 gal. water, 30,000# 20/40 sand, 38,660 gal. wtr, 20,000# 20/40 Sand

Casing 858 Tubing 858 Date first new oil run to tanks

Oil Transporter El Paso Natural Gas Company

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 DEC 13 1963, 19. _____
El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed By _____
By: E. S. Oberly
Title: PETROLEUM ENGINEER DIST. NO. 3
By: OR G'NAL SIGNED E. S. OBERLY
(Signature)
Title: Petroleum Engineer
Send Communications regarding well to:
Name: E. S. Oberly
Box 990, Farmington, New Mexico

