

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

New Well
~~REGULATORY~~

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 April 10, 1958
(Place) (Date)

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

SKELLY OIL COMPANY Ute "A", Well No. 1, in SW $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

M, Sec. 8, T. 31N, R. 14W, NMPM., Verde-Gallup Pool
Unit Letter

San Juan

County. Date Spudded 2-23-58

Date Drilling Completed April 4, 1958

Please indicate location:

Elevation 5904 Total Depth 2379' PETD

Top Oil/Gas Pay 2371' Name of Prod. Form. Verde-Gallup

PRODUCING INTERVAL -

Perforations

Open Hole 2274' to 2379' Depth Casing Shoe 2274 Depth Tubing 2271

OIL WELL TEST -

Natural Prod. Test: 164 bbls. oil, none bbls water in 24 hrs. min. Choke Size Swab

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs. min. Choke 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: _____ 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): Natural

Casing Tubing Date first new
Press. _____ Press. _____ oil run to tanks April 5, 1958

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter _____

Remarks: _____

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

Approved APR 11 1958 April 11, 1958, 19

OIL CONSERVATION COMMISSION

By: _____

Supervisor, Dist. # 3

Title _____

SKELLY OIL COMPANY
(Company or Operator)

By: G. E. Cooper
(Signature)

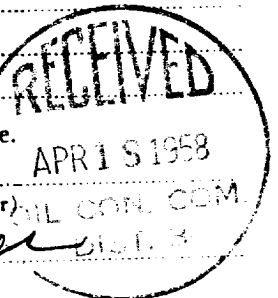
Title District Superintendent

Send Communications regarding well to:

Name SKELLY OIL COMPANY

Box 426

Address Farmington, New Mexico



INTERNATIONAL COMMISSION

AND CONCERNING

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