

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

JAN 26 1962

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.

Roswell, New Mexico January 24, 1962
(Place) (Date)

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

John H. Trigg Federal "NM" Well No. 1-35 in NW $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)
D 35 T 188 R 308 NMPM., South Jensen Unal. Permian Pool
Unit Letter

Eddy

Please indicate location:

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

County. Date Spudded 9-23-61 Date Drilling Completed 11-2-61
Elevation 3416 Total Depth 3475 PBD 3441

Top Oil/Gas Pay 3121 Name of Prod. Form. Queen Sandstone

PRODUCING INTERVAL -

Perforations 3121-23 : 3180-82 : 3288-90 : 3293-95

Open Hole _____ Depth _____
Casing Shoe 3463 Depth _____
Tubing 3102

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): 48 bbls.oil, 6 bbls water in 24 hrs, -- min. Size --

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8 5/8"</u>	<u>652</u>	<u>190</u>
<u>4 1/2"</u>	<u>3463</u>	<u>200</u>
<u>2"</u>	<u>3102</u>	

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): 500 MCA : 29,610 gal. oil + 60,000 sand

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks 1-15-62

Oil Transporter Permian Corporation

Gas Transporter None

Remarks: _____

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

Approved _____, 19_____

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title OIL AND GAS INSPECTOR

By: John H. Trigg (Company or Operator)
(Signature)

Title Owner

Send Communications regarding well to:

Name John H. Trigg Company

Address P. O. Box 520, Roswell, New Mexico

OIL CONSERVATION COMMISSION
ARRESTA EXTERIOR OFFICE

No. Cases served

4

DATE

TIME

LOCATION

NAME

U.S. G. A.

TRAINING

FILE

BUREAU OF MINES

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OIL GAS	
PRODUCTION OFFICE	
OPERATOR	2

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator John H. Trigg				Lease Federal "BN"		Well No. 1-35	
Unit Letter D	Section 35	Township 18S	Range 30E	County Eddy			
Pool North Hansen				Kind of Lease (State, Fed, Fee) Federal			
If well produces oil or condensate give location of tanks		Unit Letter D	Section 35	Township 18S	Range 30E		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> The Permian Corporation				Address (give address to which approved copy of this form is to be sent) P. O. Box 3119 Midland, Texas			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> Insufficient to market		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below)
 Oil ☐ Dry Gas ☐
 Casing head gas ☐ Condensate ☐

FILED
 JAN 26 1962
 O. C. C.
 ARTERIA, OFFICE

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of January, 19 62.

OIL CONSERVATION COMMISSION		By	<i>John H. Trigg</i>
Approved by	<i>M. L. Armstrong</i>	Title	
Title		Company	John H. Trigg
Date	Address P. O. Box 520 Roswell, New Mexico		

JAN 26 1962