

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~WELL~~ - (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
(Place)

February 10, 1959
(Date)

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

SKELLY OIL COMPANY

Farming "E", Well No. 1, in NE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

A, Sec. 2, T. 24N, R. 6W, NMPM, Wildest Pool
Unit Letter

Rio Arriba

County. Date Spudded Aug. 10, 1958 Date Drilling Completed Sept. 2, 1958

Please indicate location:

Elevation 6677' D.F. Total Depth 7054' PBD 7043'

Top ~~Oil~~/Gas Pay 4637' Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6994-7026' w/4 shots per ft.

Open Hole None Depth 7053' Depth 7017'
Casing Shoe Tubing

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: 3050 MCF/Day; Hours flowed 3 Choke Size 24/64
Method of Testing (pitot, back pressure, etc.): Pitot

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 Completion.

Casing _____ Tubing _____ Date first new
Press. 1750# Press. 1500# 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. FEB 11 1959, 19____

SKELLY OIL COMPANY

(Company or Operator)

(Signed) P. E. COOPER

By: _____ (Signature)

Title District Superintendent

Send Communications regarding well to:

Name _____

Address Farmington, New Mexico

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

OIL CONSERVATION COMMISSION

AZTEC DISTRICT OFFICE

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