NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (GAS) ALLOWABLE

New Well

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	
WE ARE	HEREBY I	REQUEST	ING AN ALLOWABLE F	OR A WELL KNOWN AS	(Date)
SKELL	COIL CO	PANY	Lydia R	ents, Well No, i	a SM 1/ OUT
Unit L	Se	19	T. 25N R 3W	NMPM, Undesignated	(Pictured Cliffs) Pool
				July 30, 1957 Date Drilling	
Please indicate location:			Elevation /145. D.	Total Depth 3673	PBTD
D	C B	A	Top	Name of Prod. Form.	Pictured Cliffs
			PRODUCING INTERVAL -		
E	F G	H	Perforations 3576	- 3596! w/4 shots per for	ot.
				Casing Shoe	Depth Tubing 3572!
L	K J	I	OIL WELL TEST -		
			Natural Prod. Test:	bbls.oil,bbls water	Choke inhrs,min. Size
M.	N O	+	Test After Acid or Fract	ure Treatment (after recovery of vol	ume of oil equal to volume of
™•]	N O	P	load oil used):	bbls.oil,bbls water in _	Choke
		1 1	GAS WELL TEST -		
Sec. 1	9-2 5N-3 W				
	ing and Com		- Natural Prod. Test:	MCF/Day; Hours flowed	Choke Size
Size	Feet	SAR	me and or reserving (prior)	, back pressure, etc.):	
			Test After Acid or Fracti	ure Treatment: 3690 M	CF/Day; Hours flowed 3 hrs.
10-3/4"	210	150	Choke Siz Open 2 Metho	od of Testing: Pitet	
			Acid or Fracture Treatmen	t (G ive amounts of materials used, s	
5-1/2"	36581	150		i & 45,440 gals. water.	
2"	35721		Casing 1050# Tubing	Date first new oil run to tanks August	
				oil run to tanks August	21, 1957
			Oil Transporter		
			Gas Transporter Pacif	ic Northwest Pipeline Cor	pany 2
Kemarks:	••••••••••				19 63
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	***************************************	•••••	••••••		
I hereby	y certify th	at the infor	mation given above is true	e and complete to the best of my kn	owledge.
pproved	SEP 17	1957	, 19	SKELLY OIL COMPANY	
			, , , , , , , , , , , , , , , , , , , ,	(Company or	Operator)
OII	CONSER	VATION	COMMISSION	By: (Signed) P. E.	ប្ទុរិ្ទជ
				(Signatu	
y: Orig	inal Sigr	ed Eme	ry C. Arneld	Title District Superin	tendent
itle Supervisor Dist. (3				Send Communications	
itle Sul	Jervisor Dig	ie. : 3		Name SKELLY GIT COMPAN	VY
				80x 42€	
				Address. Jammi antina. Nam. 1	La

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