

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~CONTRACT~~ (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..... September 24, 1958
(Place) (Date)

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

Skelly Oil Company Lydia Rentz, Well No. 5, in SE $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)

P, Sec. 20, T. 25N, R. 3W, NMPM., South Blanco (P.C.) Ext. Pool
Unit Letter

Rio Arriba County. Date Spudded 8 - 28 - 58 Date Drilling Completed 9 - 7 - 58

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P #5

Section 20-25N-3W

Tubing, Casing and Cementing Record

Size	Feet	Sax
OD 10-3/4"	220	200
OD 5 1/2"	3984	150
2" EUE	3849	

Elevation 7360' Total Depth 3962' PBTD 3922'

Top ~~rock~~ Gas Pay 3778' Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 3778-83', 3789-94', & 3804-19' with 4 shots per foot.

Open Hole none Depth 3961' Casing Shoe 3837' Depth 3837' 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: none MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 1084 MCF/Day; Hours flowed 3

Choke Size 2" open Method of Testing: Pitot

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000# 20-40 sand and 40,000 gals. water

Casing _____ Tubing _____ Date first new
Press. 1050# Press. 1050# oil run to tanks

Oil Transporter _____

Gas Transporter Pacific Northwest Pipeline Corporation

Remarks: _____

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

Approved SEP 25 1958, 19.....

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Skelly Oil Company CON. COM.
(Company or Operator) DIST. 3

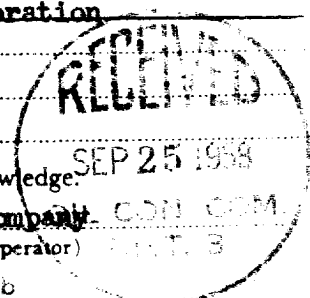
(ORIGINAL SIGNED) H. E. Aeb
(Signature)

By: _____

Title District Foreman
Send Communications regarding well to:

Name SKELLY OIL COMPANY
Box 286

Address Farmington, New Mexico



**OIL CONSERVATION COMMISSION
AZTEC DISTRICT OFFICE**

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