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NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

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

November 3, 1961

i i i i i i i i i i i i i i i i i i i	ile ilenain		Farmington, New Mexico November 3, 196
WE ARE F	HEREBY RE Natural Ga	QUESTI Las Compa	(Place) (Date) NG AN ALLOWABLE FOR A WELL KNOWN AS: any Canyon Largo Unit, Well No
(Co	ompany or Ope	rator) 2	(Lease) So. Blanco Pictured Cliffs Pool
um L Rio Arril	ba.		County Date Spudded 9-8-51 Date Drilling Completed 9-13-61
Please indicate location:			County Date Spudded 9-8-51 Elevation 6670 G Total Depth 2901 9-13-61 Top Oil/Gas Pay 2834 Perf Name of Frod. Form. Pictured Cliffs
D	C B	A	PRODUCING INTERVAL -
			Perforations 2834-2848
E	F G X	H	Open Hole
L	K J	I	OIL WELL TEST - Choke Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size
M	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used):bbls.oil,btls water inhrs,min. Size
1750 N	1650 W		GAS WELL TEST -
	(FOOTAGE)		Natural Prod. Test: MCF/Day; Hours flowed Choke Size
Size	sing and Ceme Feet	Sax	Test After Acid or Fracture Treatment:MCF/Day; Hours flowed3
8 5/8"	114	140	Choke Size 3/4" Method of Testing: Calculated A.O.F.
2 7/8"	2891	215	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):33,674 gal water, 30,000# sand
			Casing 829 Tubing Date first new oil run to tanks oil run to tanks
			Oil Transporter El Paso Natural Gas Company El Paso Natural Gas Company
Remarks:			Gas Transporter
I here Approved.	eby certify th	nat the inf	formation given above is true and complete to the best of my knowledge CON. The state of the best of the best of my knowledge CON. The state of the state of the best of my knowledge CON. The state of the best of the best of my knowledge CON. The state of the best of the best of my knowledge CON. The state of the state of the best of the best of my knowledge CON. The state of the best o
			N COMMISSION By: (Signature) Petroleum Engineer
			Title
TitleSup	ervisor Dist.	.# 3	Name Box 990, Farmington, New Mexico

SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
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OPERATOR

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