

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
820388-16

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 May 15, 1959
(Place) (Date)

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

El Paso Natural Gas Company Lindrith Unit, Well No. 31, in SW $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)
E, Sec. 24, T. 24N, R. 3W, NMPM., So. Blanco P.C. Pool
Unit Letter

Rio Arriba

Please indicate location:

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

1800'N, 990'W

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8"	118'	74
5 1/2"	3194'	50
1 1/4"	3136'	--

County. San Juan Date Spudded 4-17-59 Date Drilling Completed 4-21-59
Elevation 7035' Total Depth 3204' ~~xxxx~~ C.O. 3179'

Top Oil/Gas Pay 3094' (Perf.) Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 3094-3104; 3124-3134; 3144-3156

Open Hole None Depth 3203' Depth Casing Shoe 3203' Depth Tubing 3136'

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 load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

GAS WELL TEST -

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

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

Test After Acid or Fracture Treatment: 968 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A.O.F.

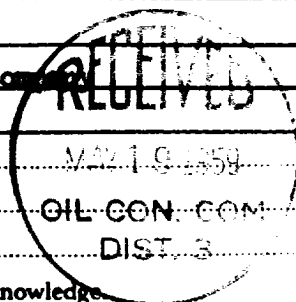
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 33,792 gallons water & 35,000# sand

Casing 976 Tubing 976 Date first new oil run to tanks _____
Press. _____ Press. _____

Oil Transporter El Paso Natural Gas Products Company

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 MAY 19 1959, 19____

El Paso Natural Gas Company

(Company or Operator)

Original Signed C. D. COX

By: _____ (Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

Original Signed Emery C. Arnold

By: _____

Title Supervisor Dist. # 3

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received		
DISTRIBUTION		
Operator	✓	
State	✓	
Proration Unit	✓	
State Land Office		
U. S. G. S.		
Transporter		
File	✓	✓