

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~(OIL)~~ - (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 December 30, 1957
(Place) (Date)

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

Southern Union Gas Co. Jicarilla, Well No. 3-D, in NE 1/4 SE 1/4,
(Company or Operator) (Lease)
I, Sec. 32, T. 26N, R. 3W, NMPM., Tapicito P.C. Pool
Unit Letter

Rio Arriba

County. Date Spudded 8/16/56 Date Drilling Completed 8/27/56
Elevation 7127 Total Depth 1082 PBD

Please indicate location:

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

Top ~~Oil~~/Gas Pay 1021 Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 1021 - 1050 1 shots/ft
Open Hole _____ Depth _____
Casing Shoe 1081 Tubing 1021

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____
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: 104 MCF/Day; Hours flowed 3 Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9 5/8"</u>	<u>197</u>	<u>125 sx</u>
<u>5 1/2"</u>	<u>1081</u>	<u>200 sx</u>

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

Test After Acid or Fracture Treatment: 1,727 MCF/Day; Hours flowed 3

Choke Size 3/4 Method of Testing: One point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Sand Water frac w/42,000 gals. water 20,000# sand
Casing _____ Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter Southern Union Gas Company

Remarks: Absolute potential after fracture was 19,191 mcfpd

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

Approved JAN 2 1957, 19____

Southern Union Gas Company
(Company or Operator)

By: Paul J. Blate
(Signature)

OIL CONSERVATION COMMISSION

Title Drilling Supt.
Send Communications regarding well to:

By: _____
Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Name Southern Union Gas Company

Address 1001 Burt Bldg. - Dallas, Texas



