

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.

Albuquerque, New Mexico

August 13, 1957

(Place)

(Date)

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

Northwest Production Corporation

"X"

Well No. **7-28**

NW

1/4

NE

1/4

(Company or Operator)

(Lease)

B

Sec. **28**

T. **26N**

R. **3W**

NMPM,

Blanco Mesaverde

Pool

Unit Letter

Rio Arriba

County. Date Spudded **5-30-57**

Date Drilling Completed **7-7-57**

Please indicate location:

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

Elevation **3257.2 ungr grnd**

Total Depth **6277** PBD **6250**

Top Oil/Gas Pay **5640**

Name of Prod. Form. **Mesaverde**

PRODUCING INTERVAL -

Perforations **5640-6190**

Open Hole _____ Depth _____ Casing Shoe **6277.08** Depth _____ Tubing **6179.86**

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: **1,975** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Back pressure**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **Frac 6038-6190 w/72,324 gals wtr & 70,000# sd; 5640-5932 w/**

Casing _____ Tubing _____ Date first new **71,736 gals wtr & 70,000# sd**
Press. _____ Press. _____ oil run to tanks

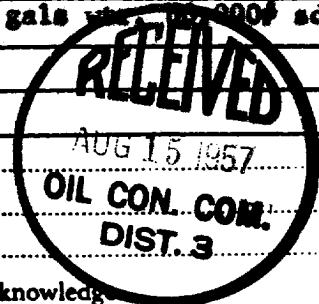
Oil Transporter _____

Gas Transporter **Waiting on pipeline**

Tubing, Casing and Cementing Record

| Size | Feet | Sax |
|----------------|----------------|------------|
| 10-3/4" | 199.75 | 200 |
| 7-5/8" | 4112.22 | 200 |
| 5-1/2" | 2249.13 | 245 |
| 2-3/8" | 6160.03 | --- |
| 1-1/4" | 3848.04 | --- |

Remarks: _____



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

Approved _____ Aug. 15, 1957, 19 _____

Northwest Production Corporation

(Company or Operator)

By: **Ray Phillips RAY PHILLIPS**

(Signature)

Asst Mgr, Prod Operations

Title _____
Send Communications regarding well to:

Name **W. R. Johnston**

Address **520 Simms Bldg, Albuquerque, N.M.**

OIL CONSERVATION COMMISSION

By: **Original Signed Emery C. Arnold**

Title **Supervisor Dist. # 3**

| | | |
|------------------------------------|------------------|---|
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