

NEW MEXICO OIL CONSERVATION COMMISSION	
DISTRIBUTION	
SALES OFFICE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

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 QUADRUPPLICATE 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, N. M......10-12-61.....
(Place) (Date)

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

Caulkins Oil Company.....Breesh....., Well No. PC-283....., in.....NW.....SW.....
(Company or Operator) (Lease)

L....., Sec. 13....., T. 26 N....., R. 7 W....., NMPM., South Blanco Pictured Cliffs Pool
Unit Letter

Rio Arriba..... County. Date Spudded 5-28-52..... Date Drilling Completed 5-26-52.....
Elevation 6142 DF..... Total Depth 2380..... PBTD 2380.....

Please indicate location:

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

Top Oil/Gas Pay 2310..... Name of Prod. Form. Pictured Cliffs.....

PRODUCING INTERVAL -

Perforations

Open Hole 2312 to 2380..... Depth 2312..... Depth Casing Shoe 2303.....

OIL WELL TEST -

Natural Prod. Test:..... bbls. oil,..... bbls water in..... hrs,..... min. Choke Size.....

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. Choke Size.....

GAS WELL TEST -

Natural Prod. Test: no test..... MCF/Day; Hours flowed..... Choke Size.....

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

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

Choke Size..... Method of Testing:.....

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Fractured with 50,000# 10-20 sand and 21,241 gallons water.....

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

Oil Transporter.....

Gas Transporter Southern Union Gas Company.....

Remarks: This is an old well which was shut in 11-6-58 because it was not profitable to operate. While cleaning up after free it appears to now be a commercial well. Southern Union Gas Co. is already connected to the well and deliverability test will commence 10-15-61

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

Approved Oct 16 1961....., 19.....

Caulkins Oil Company.....
(Company or Operator)

By: Frank Gray.....
(Signature)

Title Superintendent.....
Send Communications regarding well to:

Name Frank Gray.....

Address Box 740, Farmington, N. M......

OIL CONSERVATION COMMISSION
Original Signed By

By: A. R. KENDRICK.....

Title PETROLEUM ENGINEER DIST. NO. 3.....

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
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