

4 OCC Aztec  
2 Occ.  
1 NWP  
1 Tom Benton  
1 File

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 July 6, 1959  
(Place) (Date)

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

Occidental Petroleum Corporation West, Well No. 5-8, in NW  $\frac{1}{4}$  SE  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

J, Sec. 8, T. 26N, R. 5W, NMPM, South Blanco PC Ext. Pool  
Unit Letter

Rio Arriba

County. Date Spudded. 5-14-59 Date Drilling Completed 6-15-59

Please indicate location:

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

Elevation 6957 DF Total Depth 3585 PBD 3583

Top Oil/Gas Pay 3492 Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 3492-3551

Open Hole None Depth Casing Shoe 3583 Depth Tubing 3459

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: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8-5/8"</u>	<u>211</u>	<u>110</u>
<u>5-1/2"</u>	<u>3570.99</u>	<u>165</u>
<u>1-1/4"</u>	<u>3457</u>	
	<u>3559</u>	

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

Test After Acid or Fracture Treatment: 3205 CAOD 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): 30,000 gallons water 75,000# 10-20 sand 40 Rubber balls

Casing Tubing Date first new Press. 1075 Press. 1074 oil run to tanks \_\_\_\_\_

Oil Transporter \_\_\_\_\_

Gas Transporter El Paso Natural Gas Co.

Remarks: \_\_\_\_\_

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

Approved JUL 8 1959, 19\_\_\_\_

Occidental Petroleum Corp.

(Company or Operator)

By: Jim L. Jacobs

(Signature)

Title Geologist

Send Communications regarding well to:

Name Occidental Petroleum Corp.

Address Box 167, Gardena, Calif.

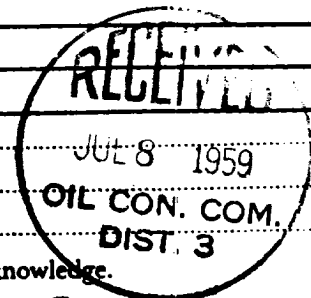
OIL CONSERVATION COMMISSION

Original Signed Emery C. Arnold

By: \_\_\_\_\_

Supervisor Dist # 3

Title \_\_\_\_\_



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