NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

					Farmingte (Place)	on, New	Mexico	Febru	ary 15,	
			ESTING AN ALLO						,	•
Shel	Shell Oil Company			• Phillips	No.7 Well N	o Gov't	-41-15 in	NE	ME NE	1/4
(Company or Operator)			!	(Lease)						
Unit 1	Letter	Sec	5, T. 25N	, R12W	, NMPM.,	•••••	Bisti			Pool
Sax	n Juan		County. Da	to Smidded	6-19-57	Date	D=1111== (empleted.	6-27-	57
Please indicate location:			£levation	KB 6260.7		al Depth	L905	PBTD	4900	<u> </u>
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D	C	В	PRODUCING IN							
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E	F	G 1			4834-44. L			Depth		
	_		Open Hole		Dep Cas	ing Shoe	14900	Tubing_	4770	
			OIL WELL TES	<u>r</u>						
L	K	J	Natural Prod	- . Test: 171	bbls.oil,	ee bb	de waten in	21,		Choke #
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М	N	0 1	3 1		e Treatment (af				21	
			load oil used	d):b	ols,oil,	bbls w	ater in	hrs,	min. Size	·
			GAS WELL TEST	<u>-</u>						
Co. He	ell Go	v't.42-	15 Natural Prod	Test:	MCF,	/Day; Hour	s flowed	Choke	Size	
Tubing ,Ca	sing and	Cementing			pack pressure,					
Size	Fee	t Sa			Treatment:			/b	C1	
			i i						110wed	
8-5/8	37 13	3 8	5 CHOKE SIZE	me criod	of Testing:			- i		
4-1/2	2" 490		Acid or Fract	ure Treatment	(Give amounts o	of materia	ls used, su	h as acid,	water, oil	, and
4-1/2	- 490	0 150	sand): 200	gal. mud e	cid and Sa	nd oil	fracture	##/ 1000 - 150 - 150 - 15	/gal sar gal. cr	ude.
2-3/8	3" 477	۸ ا	Casing	Tubing	Date firs oil run t	st new				
2-5/0	411							<u> </u>		
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	- 	-	•		o Natural	Gas Com	pany	-/2	47111	1
Kemarks:		••••••••	•••••••••••••••••••••••••••••••••••••••		***************************************		•••••	/AL	PFIAI	'
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I here	by certif	y that the	information given a					wledge.	ON. CO ST. 3	M/
Approved		•••••••	FEB 1 8 1060	, 19	Shell 0	il Comp	any	<u> </u>	ST. 3	
						Origina?	mpany or O	perator)	-	
OIL CONSERVATION COMMISSION					By:	B. W. 8	SHEPARD	**********		
Original Signed Emery C. Arnold							(Signatur	?)		
Ву:					TitleE					
T'ala		9	Supervisor Dist. # 3	3	Send Communications regarding well to:					
Title			•		Name S	hell Oi	1 Compan	У		
					P	ost Off	ice Box	158. Far	mington	. N.W.

State Land Office

U. S. G. S.

Transporter

File