

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 29, 1959

(Place)

(Date)

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

El Paso Natural Gas Company San Juan 28-6 Unit, Well No. 94(MD) in NW 1/4 NE 1/4,
(Company or Operator) (Lease)
B Sec 36 T. 28N R. 6W, NMPM, Wildcat Dakota Pool
Unit Letter
Rio Arriba

Please indicate location:

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

990'N, 1650'E

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8"	313	250
9 5/8"	3537	150
7"	6990	630
5"	1014	200
2 3/8"	7643	---
1 1/4"	5581	---

County. Date Spudded 7-27-59 Date Drilling Completed 10-13-59
Elevation 6543 Total Depth 7920 ~~7920~~ C.O. 7818'

Top Oil/Gas Pay 7552' (Perf.) Name of Prod. Form. Dakota

PRODUCING INTERVAL - 7552-7662; 7572-7584; 7658-7675;
Perforations 7702-7712; 7744-7754; 7760-7770

Open Hole None Depth 7913' Depth 7643'
Casing Shoe Tubing

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: _____ MCF/Day; Hours flowed _____ Choke Size _____

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

Test After Acid or Fracture Treatment: 2628 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A.O.F.

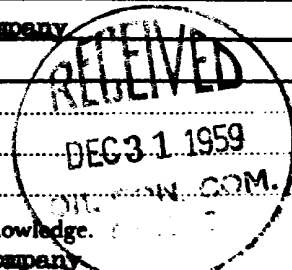
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,556 gal. oil, 20,000# sand & 1000 gal. 7 1/2% MCA

Casing Tubing 2496 Date first new
Press. _____ oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Guiberson "AG" Production Packer set at 6750'.



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

Approved: DEC 31 1959, 19____

El Paso Natural Gas Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: ORIGINAL SIGNED A.M. SMITH
(Signature)

By: Original Signed Emery C. Arnold

Title: Petroleum Engineer
Send Communications regarding well to:

Title: Supervisor Dist. # 3

Name: E. S. Oberly

Address: Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

DISTRICT OFFICE

DATE 5

TIME 3

BY 1

U. S. S. 1

Transit/Ref 1

File 1