

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRORATION OFFICE	
OPERATOR	

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.

Durango, Colorado  
(Place)

June 20, 1962  
(Date)

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

**Socony Mobil Oil Company, Inc.** (Company or Operator) **Boulder** (Lease), Well No. **12-23** in **SW** 1/4 **NW** 1/4,  
**E** Sec. **23**, T. **28N**, R. **1W**, NMPM., **Boulder Mancos** Pool  
Unit Letter

**Rio Arriba**

County. Date Spudded **4/30/62** Date Drilling Completed **5/22/62**  
Elevation **7288** KB Total Depth **4530** FT/D **4530**

Please indicate location:

Top Oil/Gas Pay **4169** Name of Prod. Form. **Fractured Gallup**

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

PRODUCING INTERVAL - **4499/4494, 4459/4449, 4446/4441, 4430/4425, 4397/4380**  
Perforations **4368/4358, 4347/4337, 4326/4316, 4308/4298, 4290/4285, 4276/4271, 4251/4246, 4225/4215,** Depth **4287/4282, 4529** Tubing **4187/4182, 4174/4169**  
Open Hole Casing Shoe

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 Choke load oil used): **70.4** bbls. oil, \_\_\_\_\_ bbls water in **24** hrs, \_\_\_\_\_ min. Size **2"**

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: \_\_\_\_\_ 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): **1390 Bbls. crude**

Casing Press. \_\_\_\_\_ Tubing Press. \_\_\_\_\_ Date first new oil run to tanks **6/13/62**

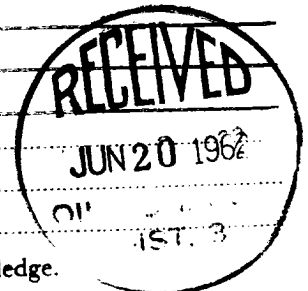
Oil Transporter **Industrial Oil Company**

Gas Transporter \_\_\_\_\_

(FOOTAGE)  
Tubing, Casing and Cementing Record

Size	Feet	Sax
9-5/8"	123	75
7"	3484	120
4 1/2"	1172	140
2" tbg	4494	None

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



I hereby certify that the information given above is true and complete to the best of my knowledge.  
Approved **JUN 20 1962**, 19\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
**Socony Mobil Oil Company** (Company or Operator)

OIL CONSERVATION COMMISSION

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

Title **Supervisor Dist. # 3**

cc: **NMOCC 4 R.L.OG 1 File 1**

By: **PM Barry by RC Mills**  
**P. M. Barry** (Signature)

Title **Dist. Prod. Supt.**  
Send Communications regarding well to:

Name **P. M. Barry**

Address **P. O. Box 3371, Durango, Colorado**