

4-112000 /
1-Featherstone
1-Reese
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.

Farmington, New Mexico Feb 12, 1958
(Place) (Date)

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

Olen F. Featherstone Roberson, Well No. 3, in SE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

H, Sec. 36, T. 27N, R. 13W, NMPM, Undesignated Pool
Unit Letter

San Juan County. Date Spudded 1-5-58 Date Drilling Completed 1-18-58

Please indicate location:

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

Elevation 9921 ft Total Depth 5153 PBD

Top Oil/Gas Pay 5038 Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 5038-5078

Open Hole None Depth 5149 Depth 5048
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 Choke load oil used): 288 bbls. oil, 0 bbls water in 24 hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9-5/8</u>	<u>188</u>	<u>200</u>
<u>5 1/2</u>	<u>5151</u>	<u>125</u>
<u>2-3/8</u>	<u>5048</u>	

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

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

Choke Size _____ Method of Testing: _____

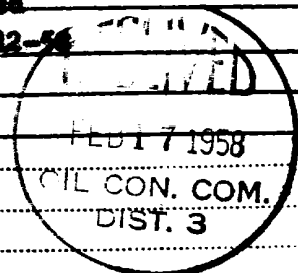
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000 gal oil 40,000# 20-40 sd

Casing 2-12-58 Date first new
Press. 2-12-58 oil run to tanks

Oil Transporter _____

Gas Transporter _____

Remarks: _____



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

Approved FEB 17 1958, 19____ Olen F. Featherstone
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold Title _____

Title Supervisor Dist. # 3

By: _____
(Signature)

Title Consulting Engineer
Send Communications regarding well to:

Name Val R. Reese & Assoc., Inc.

Address 120 S. Commercial, Farmington, N.M.

OIL CONSERVATION COMMISSION AZTEC DISTRICT OFFICE

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Producers	1	
State Land		
U. S. G. S.		
Transporter		
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