

**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.

**Farmington, New Mexico**

**July 23, 1958**

(Place)

(Date)

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

**Southern Union Gas Company Navajo-Indian**, Well No. **1-B**, in **SW**  $\frac{1}{4}$  **SW**  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

**H**, Sec. **30**, T. **27N**, R. **8W**, NMPM., **South Blanco Pictured Cliffs** Pool

Unit Letter

**San Juan County**

County. Date Spudded **Aug. 18, 1957** Date Drilling Completed **Aug. 31, 1957**

Elevation **6077 D.F.** Total Depth **2124** PBD **2077**

Top **SW**/Gas Pay **2000** Name of Prod. Form. **Pictured Cliffs**

PRODUCING INTERVAL -

Perforations **2000 to 2060 4 shots per ft.**

Open Hole **None** Depth **2118** Depth **2046**  
Casing Shoe Tubing

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): \_\_\_\_\_ 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	Size
<b>9-5/8"</b>	<b>94.85</b>	<b>80</b>
<b>5 1/2"</b>	<b>2118</b>	<b>100</b>

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

Test After Acid or Fracture Treatment: **398** MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: **Line Deliverability thru Orifice Meter**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): \_\_\_\_\_

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

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

Gas Transporter **Southern Union Gas Company**

Remarks: **This form filed for revised allowable since rework on this well**  
**The above deliverability is determined from annual deliverability test chart**  
**obtained from well during May 24 to June 1, 1958.**

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

Approved: **JUL 28 1958**, 19\_\_\_\_\_

**Southern Union Gas Co.**

(Company or Operator)

By: *Paul Delato*  
(Signature)

**OIL CONSERVATION COMMISSION**

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

Title **Supervisor Dist # 3**

Title **Drilling Superintendent**  
Send Communications regarding well to:

Name **A. M. Wiederkehr**

Address **1001 Burt Building, Dallas, Texas**

# OIL CONSERVATION COMMISSION

## AZTEC DISTRICT OFFICE

No. Copies Received 11

### DISTRIBUTION

	NO.	DATE
Operator		
Santa Fe		
Proration Office		
State Land Office		
U. S. G. S.		
Transporter		
File		