

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

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.

Durango, Colorado

June 30, 1964

(Place)

(Date)

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

WALTER DUNCAN

Skelly-Government

Well No. **2**, in **SW** $\frac{1}{4}$ **SW** $\frac{1}{4}$,

(Company or Operator)

(Lease)

M, Sec. **15**,

T 27N,

R 9W,

NMPM.

Basin-Dakota

Pool

Unit Letter

San Juan

County. Date Spudded **11-12-63**

Date Drilling Completed **11-30-63**

Elevation **6244 ground** Total Depth **6910** FBTD **6880**

Top Oil/Gas Pay **6606** Name of Prod. Form. **Dakota**

PRODUCING INTERVAL -

6606-12; 6642-48; 6672-6710; 6770-85; 6801-20; 6860-74

Perforations

Open Hole **No** Depth **6909** Depth **6824**

OIL WELL TEST -

Natural Prod. Test: _____ bbls, oil, _____ bbls water in _____ hrs, _____ min. 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. Size _____

GAS WELL TEST -

Natural Prod. Test: **none** MCF/Day; Hours flowed _____ Choke Size _____

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

Test After Acid or Fracture Treatment: **3050** MCF/Day; Hours flowed **3 hrs.**

Choke Size **3/4"** Method of Testing: **Pitot**

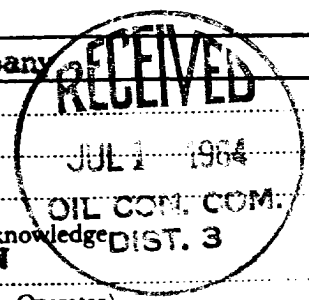
Acid or Fracture Treatment (list agents of materials used, such as acid, water, oil, and sand): **90,000# sand; 104,560 gal. water**

Casing Press. **2115** Tubing Press. **2161** Date first new oil run to tanks _____

Oil Transporter **Lamar Trucking, Inc.**

Gas Transporter **El Paso Natural Gas Company**

Remarks: _____



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

Approved **JUL 1 1964**, 19

WALTER DUNCAN

(Company or Operator)

OIL CONSERVATION COMMISSION

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

By: **Raymond T. Duncan**

(Signature)

Title _____

Send Communications regarding well to:

Walter Duncan

Title **Supervisor Dist. # 3**

Address **Box 137, Durango, Colorado**