

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~XXXX~~ - (GAS) ALLOWABLE

~~XXXXXX~~
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

March 10, 1959

(Place)

(Date)

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

Skelly Oil Company

Glenn R. Gentle

Well No. 1

in SE

SW

4

(Company or Operator)

(Lease)

N

Sec. 14

T. 27N

R. 9W

NMPM,

South Blanca (P.C.)

Pool

Unit Letter

San Juan

County. Date Spudded Jan. 21, 1953

Date Drilling Completed Jan. 27, 1953

Please indicate location:

Elevation 6139' D.F.

Total Depth 2207'

PTD 2189'

Top ~~Gas~~/Gas Pay 2120'

Name of Prod. Form.

Platured Cliffs

PRODUCING INTERVAL -

Perforations in 5 1/2" OD liner: 2120-48' & 2162-70' w/4 shots per ft.

Open Hole None

Depth

Casing Shoe 2102

Depth

Trailing 2176'

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: _____ MCF/Day; hours flow: _____ Choke Size _____

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

Test After Acid or Fracture Treatment: 1,134 MCF/Day; hours flow: 24

Choke Size _____ Method of Testing: Through E.P.N.G. Co. Meter

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000# 10/20 sand & 39,980 gals. water, using 100 rubber frac balls.

Casing _____ Tubing _____

Date first new

Press. _____

oil run to tanks

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks:

Test shown is after work-over completed February 11, 1959.

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

Approved: WAR 13 1959

, 19.

Skelly Oil Company

(Company or Operator)

By: (Signed) E. C. Arnold

(Signature)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title: District Superintendent

Send Communications regarding well test

Title: Supervisor Dist. # 3

Name: SKELLY

Box 40

Address: Farmington

OIL CONSERVATION COMMISSION

AZTEC DISTRICT OFFICE

No. Copies Received

4

DATE RECEIVED

RECEIVED

Operator

Sawyer

Production Office

State and Office

U. S. C. S.

Transporter

File