

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 9/23/60
(Place) (Date)

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

Southwest Production Company Holloway Federal, Well No. #5, in SW $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

M, Sec. 7, T. 27N, R. 11W, NMPM, Undesignated (Dakota) Pool
Unit Letter

San Juan

County. Date Spudded 8/16/60 Date Drilling Completed 8/31/60

Please indicate location:

Elevation 6134.7 C.L. Total Depth 6596 PBD 6374

Top Oil/Gas Pay 6396 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6396-6426, 6348-58, 6363-75, 6382-88 1/4 jets/ft.

Open Hole _____ Depth _____ Casing Shoe 6374 Tubing 6401

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 load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4" @ 335	250	
5 1/2" @ 6595	425-2	stage
2" NUE @ 6401'		

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

Test After Acid or Fracture Treatment: 4,365 MCF/Day; Hours flowed 3 hrs.

Choke Size 3/4" Method of Testing: Choke

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Tested by tool w/3000# & spotted 1,000 gals 7 1/2% acid fr 6371 up.
Casing _____ Tubing _____ Date first new _____
Press. 3030# Press. 2030# oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks: SWP w/88,000# 20-40 sd 67,000 gals. gelled water, FMD 1700#, TP 2400#, flush 27--#, inj. rate 48.4 BPM. SIP 1600#.

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

Approved SEP-27-1960, 19____

OIL CONSERVATION COMMISSION

By: (Original Signed Emery C. Arnold)

Title Supervisor Dist. # 3

Southwest Production Company
(Company or Operator)

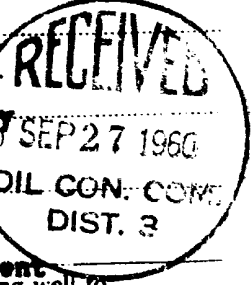
Original signed by
Carl W. Smith

By: _____
(Signature)

Title Production Superintendent
Send Communications regarding well to.

Name Southwest Production Company

Address 162 Petr. Center Bldg. - Farmington, N.M.



STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
ALBUQUERQUE DISTRICT OFFICE		
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