

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 QUADRUPPLICATE 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 January 31, 1961
(Place) (Date)

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

Southwest Production Company Edgar Federal, Well No. 6, in SW $\frac{1}{4}$, SW $\frac{1}{4}$,
(Company or Operator) (Lease)
M, Sec. 11, T. 27N, R. 12W, NMPM, Basin Dakota Pool
Unit Letter

San Juan County, Date Spudded 12/19/60 Date Drilling Completed 1/9/61
Elevation 5950 G.L. Total Depth 6260 PBD 6223
Please indicate location:

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

Top Oil/Gas Pay 6136 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6136-54 w/4 JPF & 6176-96 w/4 JPF
Open Hole _____ Depth _____ Casing Shoe _____ Depth _____
Tubing 6185

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): _____ 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	Sax
10 3/4"	325KB	200
5 1/2"	6271KB	375 2 stage
2" NUE	6185'	

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

Test After Acid or Fracture Treatment: 4,534 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Choke

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1,500 gals 7 1/2% MCA & 45,000# 20-40 sd 58,000 gals wtr. &
Casing _____ Tubing _____ Date first new _____
Press. 2090 Press. 2090 oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Remarks: SWF w/70,000# 20-40 sd & 65,000 gals wtr.

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

Approved FEB 2 1961, 19 _____ Southwest Production Company

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. #3

(Company or Operator)
Original signed by
By: Carl W. Smith
(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
AZUL DISTRICT OFFICE

NUMBER OF COPIES RECEIVED
DISTRICT

SANTA FE

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

G.S.

PRODUCTION OFFICE

OPERATOR