

**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 August 12, 1958**

(Place) (Date)

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

**Astec Oil & Gas Company**

**Hanks**

Well No. **9**, in **SE**  $\frac{1}{4}$  **SE**  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

**P**

Sec. **5**

**T**

**27-N**

R. **9-W**

NMPM.

**South Blanco P.C.**

Pool

Unit Letter

**San Juan**

County. Date Spudded **7-3-58**

Date Drilling Completed **7-11-58**

Please indicate location:

Elevation **6440 BF** Total Depth **2561** PBTD **2504**

Top Oil/Gas Pay **2445** Name of Prod. Form. **Pictured Cliffs**

PRODUCING INTERVAL -

Perforations **2453 - 2496**

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe **2561** Depth \_\_\_\_\_ Tubing **2478**

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

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

Test After Acid or Fracture Treatment: **AGF 3601** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Back Pressure**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **1600 barrels water and 60,000 lbs. sand**

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks **Not Connected**

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

Gas Transporter **Southern Union Gathering Company**

Remarks: \_\_\_\_\_

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

Approved **AUG 15 1958**, 19\_\_\_\_

**ASTEC OIL & GAS COMPANY**

(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: **ORIGINAL SIGNED BY JOE C. SALMON**

(Signature)

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

Title **District Superintendent**

Send Communications regarding well to:

Title **Supervisor Dist # 3**

Name **Joe C. Salmon**

Address **Box 786, Farmington, New Mexico**

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
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