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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.

Farmington, New Mexico

August 11, 1961

(Place)

(Date)

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

El Paso Natural Gas Company Florence "C", Well No. 10, in SE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

H, Sec. 30, T. 28-N, R. 8-W, NMPM, Basin Dakota Pool
Unit Letter

San Juan

County. Date Spudded 6-26-61 Date Drilling Completed 7-17-61
Elevation 5926' G Total Depth 6839' E.O. 6780

Please indicate location:

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

2172 N. 330 E

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
<u>9 5/8"</u>	<u>288</u>	<u>300</u>
<u>4 1/2"</u>	<u>6825</u>	<u>765</u>
<u>2 3/8"</u>	<u>6762</u>	

Top Oil/Gas Pay 6616 (PMP) Name of Prod. Form. Dakota

PRODUCING INTERVAL - 6620-6639; 6682-6696 (8 sh. each)

Perforations 6714-50; 6616-24; 6634-42; 6679-87; 6692-6700; 6711-19

Open Hole None Depth 6837 Casing Shoe 6762 Depth 6762 Tubing

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 _____

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

Test After Acid or Fracture Treatment: 1537 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A.O.F.

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 73,000 gal water, 60,000 sand

Casing 1976 Tubing 1335 Date first new Press. 1976 oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

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 AUG 16 1961, 19_____
El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

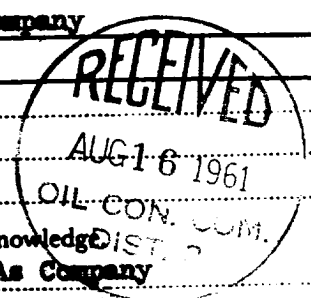
By: Original Signed D. W. Meehan
(Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name E. S. Oberly

Address Box 990, Farmington, New Mexico



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