

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 November 20, 1957
(Place) (Date)

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

El Paso Natural Gas Company Florance Well No. 3-C (PM) in NE $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)
K Sec. 19 T. 28N R. 8W NMPM, Blanco Pool
Unit Letter
San Juan County. Date Spudded 8-25-57 Date Drilling Completed 9-28-57

Please indicate location:

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

1450'S, 1750'W

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4	162'	200
7 5/8"	2280'	250
5 1/2	2389'	400
2"	4450'	---
1 1/4	2315'	---

Elevation 5795' Total Depth 4605' ~~XXXX~~ C.O. 4560'

Top Oil/Gas Pay 4116' (Perf.) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 4116-4144; 4182-4203; 4316-4326; 4378-4411;

Perforations 4430-4448; 4462-4484; 4528-4552

Open Hole None Depth 4600' Depth 4450'
Casing Shoe 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: 8565 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): 57,630 gal. water & 60,000# sand & 79,336 gal. water & 60,000#

Casing Tubing Date first new
Press. Press. 1077 oil run to tanks _____ Sand

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Baker "EGJ" Packer at 2410'; Garrett Sleeve at 2160.

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

Approved: _____ NOV 29 1957, 19 _____

El Paso Natural Gas Company

(Company or Operator)

Original Signed D. C. Johnston

By: _____ (Signature)

Title: Petroleum Engineer

Send Communications regarding well to:

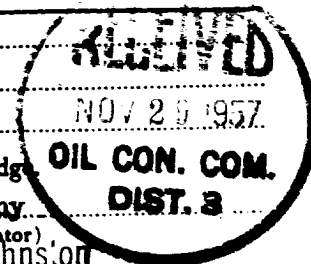
Name: E. S. Oberly

Address: Box 997, Farmington, New Mexico

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title: Supervisor Dist. # 3



OIL CONSERVATION COMMISSION	
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