

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
(Place)

April 22, 1958
(Date)

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

El Paso Natural Gas Company Tapp _____, Well No. 3(PM), in NW $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

L, Sec. 15, T. 28N, R. 8W, NMPM., Aztec P.C. Pool
Unit Letter

San Juan

County. Date Spudded 2-25-58 Date Drilling Completed 3-6-58
Elevation 5839' Total Depth 4721' ~~XXXX~~ O. 4659'

Please indicate location:

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

1650'S, 990'W

Top Oil/Gas Pay 2316' (Perf.) Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 2316-2326; 2332-2340; 2382-2406

Open Hole None Depth 2475' Depth Casing Shoe 4637'
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 _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	161'	150
7 5/8"	2464'	150
5 1/2"	2291'	250
2"	4637'	---
1 1/4"	2338'	---

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

Test After Acid or Fracture Treatment: 2790 MCF/Day; Hours flowed 3

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

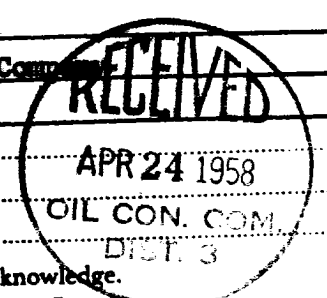
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000 gal. water and 40,000# sand.

Casing 942 Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Baker "EGJ" Perf. @ 2463'.



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

Approved April 22 APR 24 1958, 1958

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

Original Signed Emery C. Arnold

By: _____

Title: Supervisor Dist. # 3

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