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OPERATOR

## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWAPLE

New Well

CORRECTED COPY

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. Gat must be reported on 15.025 psia at 60° Fahrenheit.

Farmington. New Mexico

September 4. 1962

				(Place)	(Date)		
E ARE	HERI Paso 1	EBY RE	QUESTI	NG AN ALLOWABLE FOR A WELL KNOWN AS: company San Juan 29-5 , Well No, in	NE 14		
G (	Compan	y or Ope	rator)	(Lease) , T. 29N , R. 5W , NMPM., Blanco Mesa Verde	Pool		
San Ju	S.D		······································	County Date Spudded 6-14-62 Date Drilling Completed 5945 PBTD_	6-27-62		
PI	Please indicate location:			Top Oil/Gas Pay 5484 (Perf) Name of Prod. Form. Mesa Verde	;		
D	C	В	A	PRODUCING INTERVAL - 5484-88;5788-92;5806-10;5842-46; Perforations 5860-64;5886-90;			
E	F	G X	H	Open Hole Casing Shoe 5945 Tubing	5886		
L	K	J	I	OIL WELL TEST -  Natural Prod. Test:bbls.oil,bbls water inhrs,			
М	N	0	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal load oil used):bbls.oil,bbls water inhrs,	Choke		
650'N,	1550	12	<u> </u>	GAS WELL TEST -			
	/FOOT	AGE)		Natural Prod. Test: MCF/Day; Hours flowed Choke	Size		
-		Erct	Sax	Test After Acid or Fracture Treatment: 6421 MCF/Day; Hours	flowed 3		
9 5/8	3"	280	200	Choke SizeMethod cf Testing:			
7"		3772	150	Acid or Spaces Treatment (Give amounts of materials used, such as acid, sand):	water, oil, and		
4 1/2	2"	2262	220	Casing 1054 Tubing 1058 Date first new oil run to tanks	ar.		
1 1/4	"	5886		Oil Transporter  Cas Transporter  Cas Transporter  Cas Transporter  Cas Transporter  Cas Transporter  Cas Transporter			
Remarks	<b>:</b>				1 1 1962		
I h	ereby ce	ertify th	at the info	formation given above is true and complete to the best of my knowledge.	IST. 3		
Approve	dSEP	1.1.19	62	, 19 (Company or Operator)			
	OIL C	ONSEF	RVATION	N COMMISSION  By: ORIGINAL SIGNED H.E. McANALLY (Signature)	(Signature)		
ь C	)rioina	1 Signe	ed by W	7. B. Smith Petroleum Engineer  Title Send Communications regarding to	Title		
•				ECTOR DIST. NO. 3. Title Send Communications regarding v. E. S. Oberly	well to:		
ı itle				Box 990, Farmington, New	Mexico		