

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.

Durango, Colorado

10-22-63

(Place)

(Date)

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

Continental Oil Company
(Company or Operator)

Rattlesnake, Well No. 152, in SE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Lease)

F, Sec. 12, T. 29N, R. 19W, NMPM., Rattlesnake Dakota Pool
Unit Letter

San Juan

County. Date Spudded 6-13-63 Date Drilling Completed 6-27-63

Please indicate location:

Elevation 5375' GR Total Depth 1007' PBD

Top Oil/Gas Pay 840' Name of Prod. Form. Dakota

PRODUCING INTERVAL - (Lower Dakota) 930'-936'; 940'-944', CI bridge
plug at 923'; (Middle Dakota) 904'-916', CI

Perforations bridge plug at 880'; (Upper Dakota) 840'-844', CI

Open Hole _____ Depth _____ Casing Shoe 1007' Depth _____ Tubing _____ 880'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 70 bbls. oil, 350 bbls water in 24 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: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 20,000# sand, 25,200 gals. water, 950# "ADOMITE AQUA" additive.

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks 10-18-63

Oil Transporter Four Corners Pipe Line Co.

Gas Transporter _____

Remarks: No deviation surveys run as well was drilled with cable tools.

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved SEP 23 1963, 19_____, _____

Continental Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist # 3

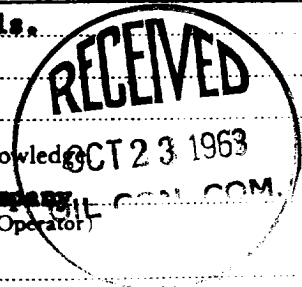
By: _____
(Signature)

Title District Manager

Send Communications regarding well to:

Name H. D. Haley

Address Box 3312, Durango, Colorado



STATE OF NEW YORK	
OIL CONSERVATION COMMISSION	
OFFICE DISTRICT OFFICE	
NUMBER OF COPIES RECEIVED	
DATE RECEIVED	
SANITARY	
FILE	
INSPECTION	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	