

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

12-26-63

(Place)

(Date)

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

Continental Oil Company

Rattlesnake

Well No. 154

in NE $\frac{1}{4}$

NW $\frac{1}{4}$

(Company or Operator)

(Lease)

C

Sec. 12

T. 29N

R. 19W

NMPM.

Rattlesnake-Dakota

Pool

Unit Letter

San Juan

County. Date Spudded 12-11-63

Date Drilling Completed

12-23-63

Please indicate location:

Elevation 5378' GR

Total Depth 974'

PBTD

Top Oil/Gas Pay 810'

Name of Prod. Form.

Dakota

PRODUCING INTERVAL -

Perforations 810'-814'

Open Hole

Depth

Casing Shoe 974'

Depth

Tubing 816'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 72 bbls. oil, 161 ^{load} 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): 10,000# sand, 10,000 gallons water, 500# "ADOMITE AQUA" additive.

Casing _____ Tubing _____

Date first new

12-24-63

Press. _____ Press. _____

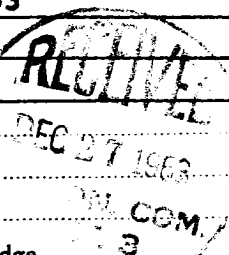
oil run to tanks

Oil Transporter

Four Corners Pipe Line Company

Gas Transporter

Remarks: No deviation survey - well drilled with cable tools.



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

Approved DEC 27 1963

, 19____

Continental Oil Company

(Company or Operator)

ORIGINAL SIGNED BY:

By: Wm. A. Butterfield

(Signature)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Title District Office Manager

Send Communications regarding well to:

Name H. D. Haley

Address Box 3312, Durango, Colorado

NMOCC(4) HDH RDP

STATE OF TEXAS		COUNTY OF DALLAS	
JAN 10 1968		MISSION	
NUMBER OF STUDENTS		7	
SANTA FE			
RIDE			
BUSSES			
LTD. FUEL			
TRANSPORT A	OIL		
FRONT END	ONS		
OPERATOR			