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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR ~~RECOMPLETION~~ - (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.

Farrington, New Mexico

April 19, 1962

(Place)

(Date)

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

Aztec Oil and Gas Company

Hare

, Well No. **15-D**, in **SW** $\frac{1}{4}$ $\frac{1}{4}$

(Company or Operator)

(Lease)

M

Sec. **3**

T. **29N**

R. **10W**

, NMPM, **Basin Dakota**

Pool

Unit Letter

San Juan

County. Date Spudded **3/17/62**

Date Drilling Completed **4/2/62**

Please indicate location:

Elevation **5817 G.L.** Total Depth **6860** PBTD **6847**

Top Oil/Gas Pay **6688** Name of Prod. Form. **Dakota**

PRODUCING INTERVAL -

Perforations **6689-6712, 6744-6754, 6824-6838 with 4 shots per ft.**

Open Hole Depth **6860** Casing Shoe **6860** Depth **6643** 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 load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

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: **ACF- 2641** MCF/Day; Hours flowed **3 hrs**

Choke Size **3/4** Method of Testing: **back-pressure**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **Fraced with 65,800 gals. water, 58,000# sand, flushed w/ 125 Bbls**

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

Oil Transporter _____

Gas Transporter **Southern Union Gas Company**

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3

Approved **April 19** **APR 24 1962**

Aztec Oil and Gas Company

(Company or Operator)

ORIGINAL SIGNED BY **JOE C. SALMON**

By: **Joe C. Salmon**

(Signature)

Title **District Superintendent**

Send Communications regarding well to:

Name **Aztec Oil and Gas Company**

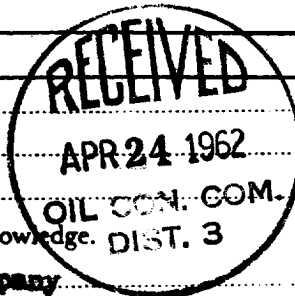
Address **Drawer # 570, Farrington, New Mexico**

OIL CONSERVATION COMMISSION

Original Signed By

By: **A. R. KENDRICK**

Title **PETROLEUM ENGINEER DIST. NO. 3**



(FOOTAGE)
Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	324	230
4 1/2	6860	750
2 3/8	6643	--