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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) 2-2-62 (Date)

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

International Oil Corp. (Company or Operator) Popoleon (Lease), Well No. 1-4, in SE $\frac{1}{4}$ SE $\frac{1}{4}$, P Sec. 4, T. 29N, R. 11W, NMPM., Davis - Dakota Pool

San Juan County. Date Spudded 11-18-61 Date Drilling Completed 12-5-61
Elevation 5785 C.L. Total Depth 6765 PBD 6723

Please indicate location:

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

Top Oil/Gas Pay 6472 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6130-95, 6540-81, 6610-20, 6621-30, 6640-16
Open Hole None Depth 6765 Casing Shoe 6763 Tubing 6624

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): _____ bbls. oil, _____ bbls. water in _____ 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: NOF 4491 MCF/Day; Hours flowed 3 hrs.

Choke Size 3/4" Method of Testing: One point back pressure

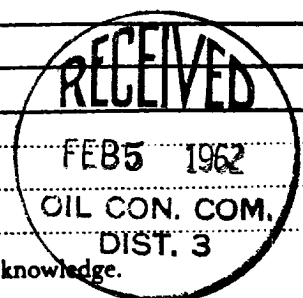
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 250 Gal. HCl, 73,350 Gal. br., 12,000# 20-40 sd.

Casing Press. 2058 Tubing Press. 2040 Date first new oil run to tanks _____

Oil Transporter _____

Gas Transporter _____

Remarks: _____



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

Approved ES, 19 International Oil Corp. (Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold Title: Consulting Engineer

Title: Supervisor Dist. 3 Name: T. A. Dugan

Address: Farmington, New Mexico

By: Original signed by T. A. Dugan (Signature)

Title: Consulting Engineer Send Communications regarding well to: