

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 9/28/61
(Place) (Date)

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

Roy Owen & Company Donella, Well No. 1, in SE $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)
P, Sec. 3, T. 29N, R. 15W, NMPM., Wildcat Pool
Unit Letter

San Juan

County. Date Spudded 7/26/61 Date Drilling Completed 8/7/61

Please indicate location:

Elevation 5164 KB Total Depth 4494 PBD 4378

Top Oil/Gas Pay 4248 Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 4314-4300

Open Hole _____ Depth _____
Casing Shoe 4494 Tubing 4304

OIL WELL TEST -

Natural Prod. Test: 15 bbls. oil, 0 bbls water in 10 hrs, 0 min. Size -

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
load oil used): 23.74 bbls. oil, None bbls water in 24 hrs, - min. Size 2"

GAS WELL TEST -

Natural Prod. Test: None 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): _____

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks 9-2-61

Oil Transporter VCA

Gas Transporter _____

Tubing, Casing and Cementing Record

Size	Feet	Sin
<u>8-5/8</u>	<u>133</u>	<u>175</u>
<u>4-1/2</u>	<u>4475</u>	<u>180</u>
<u>2-3/8</u>	<u>4304</u>	

Remarks: _____

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

Approved SEP 28 1961, 19____

Roy Owen & Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

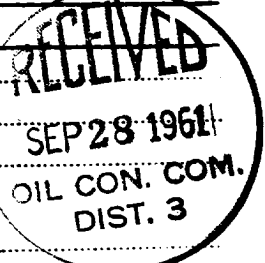
Title Supervisor Dist. # 3

By: _____
(Signature)

Title Office Manager
Send Communications regarding well to:

Name Roy Owen & Company

Address P. O. Box 232, Farmington, N.M.



STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
NUMBER OF COPIES RECEIVED		
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OPERATOR	/	