

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 Dec. 17, 1962
(Place) (Date)

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

Southern Union Production Company Federal, Well No. 2-25, in SW $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

Q, Sec. 25, T. 30N, R. 13W, NMPM., Basin Dakota Pool
Unit Letter

San Juan County. Date Spudded 11-20-62 Date Drilling Completed 12-7-62

Please indicate location:

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

Elevation 5792 Total Depth 6680 PBTD 6560

Top Oil/Gas Pay 6394 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6534-6556, 6460-6500, 6448-6454 & 6394-6404

Open Hole None Depth 6680 Casing Shoe 6676 Tubing 6450

OIL WELL TEST -

Natural Prod. Test: 0 bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: 0 MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Size
<u>8-5/8"</u>	<u>273</u>	<u>175</u>
<u>4-1/2"</u>	<u>6566</u>	<u>1430 cu. ft.</u>
<u>1-1/2"</u>	<u>6440</u>	

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 3213 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Back pressure Test - CAOP 1261 MCFPD

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 88,000# 20-40 sand 1000 sacks 15% Acid 116,800 gals water.
Casing _____ Tubing _____ Date first new _____
Press. _____ oil run to tanks _____

Oil Transporter New Mexico Tankers - Platoon, Inc.

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.
Approved: December 17, 1962 JAN 3, 1962 1962
SOUTHERN UNION PRODUCTION COMPANY
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

By: T. E. Fenne
(Signature)

Title Asst. Drilling Superintendent
Send Communications regarding well to:

Name L. S. Mennink

Address P. O. Box 808 - Farmington, N.M.

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OIL CONSERVATION COMMISSION		
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