

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 QUADRUPPLICATE 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)

February 6, 1958
(Date)

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

El Paso Natural Gas Company Sunray, Well No. 2-D, in SE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)
H, Sec. 21, T. 30N, R. 10W, NMPM., Blanco Pool
Unit Letter

San Juan

County. Date Spudded 11-30-57 Date Drilling Completed 12-12-57
Elevation 6302 Total Depth 5386 ~~max~~ C.O. 5300'

Please indicate location:

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

Top Oil/Gas Pay 5046' (Perf.) Name of Prod. Form. Mesa Verde
PRODUCING INTERVAL - 5046-5062; 5086-5106; 5118-5130; 5160-5168; 5204-5220;
5224-5244; 5256-5280

Perforations
Open Hole None Depth 5385' Depth Casing Shoe 5209'

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 Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

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

1650N, 990E

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	162'	150
7 5/8"	3092'	250
5 1/2"	2318'	300
2"	5209'	---

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

Test After Acid or Fracture Treatment: 5105 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A. O. F.

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 67,000 gal. water & 60,000# sand & 65,800 gal. water & 60,000# Sand

Casing Press. 1033 Tubing Press. 1036 Date first new oil run to tanks _____

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: _____

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

Approved FEB 10 1958, 19____

El Paso Natural Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

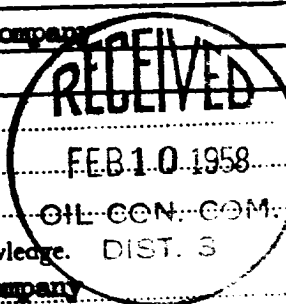
Title Supervisor Dist. # 3

By: Original Signed F. H. WOOD
(Signature)

Title Petroleum Engineer
Send Communications regarding well to:

Name E. S. Oberly

Address Box 997, Farmington, New Mexico



OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received	✓	
DISTRICT OFFICE		
Operator	2	
Santa Fe	1	
Proctor's Office	1	
State Land Office		
U. S. G. S.		
Transporter		
File	1	✓