

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farrington, New Mexico

November 25, 1953

(Place)

(Date)

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

El Paso Natural Gas Company

Lease

Well No. 1, in 1/4, 3/4, 1/4,

(Company or Operator)

(Lease)

T. 30N, R. 10W, NMPM, Blanco Pool

(Unit)

San Juan

County. Date Spudded 6-2-53, Date Completed 11-2-53

Please indicate location:

			1

1000'

100'

Casing and Cementing Record

Size Feet Sax

2-5/8	115	125
7	1620	500

Elevation 6357' Total Depth 5152, P.B.

Top oil/gas pay 1660 Prod. Form Reservoir

Casing Perforations: None or

Depth to Casing shoe of Prod. String 1630

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential 5,550 MCF/D

Size choke in inches

Date first oil run to tanks or gas to Transmission system: Waiting on pipeline.

Transporter taking Oil or Gas: 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 12-1-53, 1953

OIL CONSERVATION COMMISSION

By:

Title PETROLEUM ENGINEER DIST. NO.

By: [Signature] (Signature)

Title Petroleum Engineer

Send Communications regarding well to:

Name J. J. Coel

Address 207 Farrington, New Mexico

Address

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>5</u>		
DISTRIBUTION		
	NO. FURNISHED	
Operator	<u>2</u>	
Santa Fe	<u>1</u>	
Peroration Office		
State Land Office		
J. S. G. S.		
Transporter	<u>1</u>	<input checked="" type="checkbox"/>
File		