

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.

Farmington, New Mexico April 14, 1953  
(Place) (Date)

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

El Paso Natural Gas Company Kortachan, Well No. 4, in NE  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)  
E 1, Sec. 30, T. 31N, R. 8E, NMPM, Blanco Pool  
(Unit)  
San Juan County. Date Spudded 11-14-52, Date Completed 1-2-53

Please indicate location:


1650'N 790'E

## Casing and Cementing Record

Size Feet Sax

9 5/8"	172'	125
7"	5190'	300

Elevation 6577' DP Total Depth 5895', P.B.Top oil/gas pay 5226' Prod. Form C.H.Casing Perforations: None orDepth to Casing shoe of Prod. String 5190'

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 1,300 MCF/D

Size choke in inches

Date first oil run to tanks or gas to Transmission system: Waiting on Pipe Line.Transporter taking Oil or Gas: EL PASO NATURAL GAS COMPANY

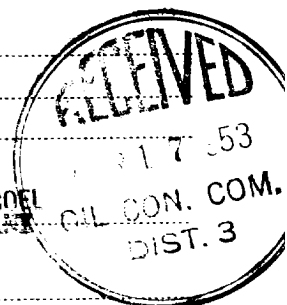
Remarks:

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

Approved 4-24, 19 53ORIGINAL SIGNED E. J. Coel  
(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)

Title Petroleum Engineer  
Send Communications regarding well to:Name E. J. CoelAddress Box 997 Farmington, New MexicoBy: [Signature]Title [Signature]

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Furnished <u>4</u>		
DISTRIBUTION		
	No. FURNISHED	
Operator	<u>1</u>	
Santa Fe	<u>1</u>	
Promotion Office	<u>1</u>	
State Land Office		
U. S. C. S.		
Transporter		
File	<u>1</u>	<input checked="" type="checkbox"/>