

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.

Casper, Wyoming

11-11-60

(Place)

(Date)

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

The Atlantic Refining Co.

(Company or Operator)

UTK

(Lease)

Well No. 5

in. 9 1/4

NE

1/4

8

Sec. 35

T. 31N

R. 16W

NMPM.

Horseshoe-Gallup

Pool

San Juan

County. Date Spudded 10-20-60

Date Drilling Completed 10-25-60

Please indicate location:

Elevation 5657 OR

Total Depth 1675

PBTD 1633

Top Oil/Gas Pay 1600

Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1600-1603

Open Hole None

Depth

Casing Shoe 1667.92

Depth

Tubing 1605.20

OIL WELL TEST -

Natural Prod. Test: None bbls.oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 70.83 bbls.oil, 0 bbls water in 24 hrs, 0 min. Size 1-1/2"

Plunger

GAS WELL TEST -

Natural Prod. Test: _____ 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 11-9-60

Oil Transporter McWood Corporation

Gas Transporter _____

Remarks: Treated Perforations 1600-1603' with 40,000# 10/20 sand in 31,160 Lease Crude.
Treating pressure range 1100# to 2200#, average injection rate 30.4 BPM.

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

Approved NOV 18 1960, 19_____

The Atlantic Refining Co.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

By: R. P. Curry

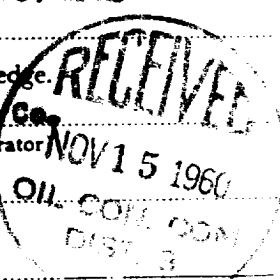
(Signature)

Title: Chief Clerk

Send Communications regarding well to:

Name: The Atlantic Refining Co.

Address: Box 520 - Casper, Wyoming



Tubing, Casing and Cementing Record

Size Feet Sax

8-5/8	104.97	110
4-1/2	1667.92	160
2-1/2"	1605.20	

STATE OF NEW MEXICO	
OIL COMMISSION DISTRICT OFFICE	
DISTRICT OFFICE	
RECEIVED	
SANTA FE	
FILE	
U.S.G.S.	
L.M.D. OFFICE	
TRANSPORTER	
PRODUCTION OFFICE	
OPERATOR	
OIL	
GAS	