

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
NEW OIL WELL

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, N. M.

July 5, 1961

(Place)

(Date)

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

Southwest Production Co. Charles Hutton, Well No. **1**, in **NE** $\frac{1}{4}$ **NE** $\frac{1}{4}$,

(Company or Operator)

(Lease)

A

Sec **23**

T **30N**

R **12W**

NMPM.

Basin Dakota

Pool

Unit Letter

San Juan

County. Date Spudded **5/18/61**

Date Drilling Completed **6/5/61**

Please indicate location:

Elevation **5512 GL**

Total Depth **6538**

PBTD **6508**

Top Oil/Gas Pay **6290**

Name of Prod. Form. **Dakota**

PRODUCING INTERVAL -

Perforations **6290-99, 6312-15, 6347-62, 6448-54 & 6480-95**

Open Hole _____ Depth _____

Casing Shoe _____ Depth _____

Tubing _____

OIL WELL TEST -

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

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 _____

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

Test After Acid or Fracture Treatment: **2,880** MCF/Day; Hours flowed **3**

Choke Size **3/4"** Method of Testing: **Choke**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **1250 gals acid & SWF w/89,000# ad & 94,000 gals. gelled wtr.**

Casing _____ Tubing _____ Date first new _____

Press. **2200#** Press. **2200#** oil run to tanks _____

Oil Transporter _____

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 **JUL 7 1961**, 19 _____

Southwest Production Company

(Company or Operator)

Original signed By **Carl W. Smith**

By: _____ (Signature)

OIL CONSERVATION COMMISSION

By: (Original Signed **Emery C. Arnold**)

Title **Production Superintendent**

Send Communications regarding well to:

Title **Supervisor Dist. # 3**

Name **Southwest Production Company**

Address **162 Petr. Center Bldg., Farmington, N.M.**



STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
AZUL DISTRICT OFFICE		
NUMBER OF COPIES RECEIVED		
DISTRICT		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
REGULATION OFFICE		
OPERATOR		