

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.

Farmington, New Mexico April 25, 1960
(Place) (Date)

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

Astec Oil and Gas Company Grenier, Well No. 9, in NE 1/4 1/4,
(Company or Operator) (Lease)
B, Sec. 13, T. 31N, R. 12W, NMPM., Undesignated Pictured Cliffs Pool

Unit Letter

San Juan

County. Date Spudded 4/5/60 Date Drilling Completed 4/12/60
Elevation 6202 G.L. Total Depth 2887 FBTD 2864

Please indicate location:

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

Top Oil/Gas Pay 2880 Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 2880-2846

Open Hole _____ Depth _____ Casing Shoe 2864 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 load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

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: AOE- 268 MCF/Day; Hours flowed 3 hrs.

Choke Size 3/4 Method of Testing: Back-pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and

sand): Sand-water fraced with 800 Gals. water and 40,000# sand

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

Oil Transporter _____

Gas Transporter Southern Union Gathering System

Remarks: _____

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

Approved April 25 APR 26 1960, 1960 Astec Oil & Gas Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: ORIGINAL SIGNED BY JOE C. SALMON
(Signature) Joe C. Salmon

By: Original Signed Emory C. Arnold

Title District Superintendent

Send Communications regarding well to:

Title Supervisor Dist. # 3

Name Astec Oil & Gas Company

Address Box # 786, Farmington, New Mexico