

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.

Abilene, Texas

10-15-62

(Place)

(Date)

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

El Chorro Exploration, Inc. **D. Haffelfinger**, Well No. **4**, in **SE** $\frac{1}{4}$ **NE** $\frac{1}{4}$,
(Company or Operator) (Lease)

H, Sec. **18**, T. **8 S**, R. **35 E**, NMPM, **Milnesand-San Andres** Pool
Unit Letter

Roosevelt

County. Date **Re-entered 2-26-62** Date **Recompleted 10-1-62**

Please indicate location:

Elevation **4223' GR** Total Depth **9340** PBTD **4770**

Top Oil/Gas Pay **4530** Name of Prod. Form. **San Andres**

PRODUCING INTERVAL -

Perforations **4576-4610 & 4625-50'**

Open Hole _____ Depth _____ Casing Shoe **4961'** Depth _____ Tubing **4763'**

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): **78** bbls. oil, **0** bbls. water in **24** hrs, **0** min. Size **Pump**

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): **3000 gallons 15% acid and 15000 gallons of oil and 15000# sand**

Casing _____ Tubing _____ Date first new _____
Press. **pump** Press. **pump** oil run to tanks **10-5-62**

Oil Transporter **The Permian Corporation**

Gas Transporter **Sinclair Oil & Gas Company**

Remarks: _____

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

Approved _____, 19____

El Chorro Exploration, Inc.

(Company or Operator)

By: *Mike Kane*
(Signature)

Title **Agent**

Send Communications regarding well to:

Name **El Chorro Exploration, Inc.**

Address **c/o Daya Operating Company**
415 Citizens Nat'l Bank, Abilene, Texas

OIL CONSERVATION COMMISSION

By: _____

Title _____