

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.

Reswell, New Mexico

June 17, 1959

(Place)

(Date)

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

John H. Trigg

Federal Trigg

35-5

SE

NE

(Company or Operator)

(Lease)

Well No. 35-5, in SE 1/4 NE 1/4,

Sec. 3

T. 14S

R. 31E

NMPM, Caprock Queen

Pool

Unit Letter
Chaves

County. Date Spudded 4-30-59

Date Drilling Completed 5-7-59

Elevation 4108

Total Depth 2730

FBTD

Top Oil/Gas Pay 2694

Name of Prod. Form. Queen Sandstone

PRODUCING INTERVAL -

Perforations 2694 - 2698

Open Hole

Depth 2730

Depth 2655

OIL WELL TEST -

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

GAS WELL TEST -

Natural Prod. Test: 1,600 MCF/Day; Hours flowed _____ Choke Size 2" orifice

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):
Washed with 250 gallons of mud acid

Casing 3804 Tubing 3804 Date first new
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter No market available, well shut in

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	107	50
4 1/2	2730	100

Remarks: _____

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

John H. Trigg

Approved _____, 19 _____

OIL CONSERVATION COMMISSION

By: _____

Title _____

(Company or Operator)

By: _____

Owner

Title _____

Send Communications regarding well to:

John H. Trigg Company

Name _____

P. O. Box 3679

Reswell, New Mexico

Address _____