NT MEXICO OIL CONSERVATION COM SSION

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(Form C-104)

Santa Fe, New Mexico REQUEST FOR (OIL) - (GAS) ALLOWABLE OFFICER New Well 1957 -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 yas sent. The allow-able 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.

			(Place) Midland, Taxas 10-25-5	
WE ARE	HEREBY R	EOUEST	TING AN ALLOWABLE FOR A WELL KNOWN AS:	(Date)
Western	Natural G	les Comp	pany Eideon "D" , Well No.1, in SW	4 NW 14
	and an all a start and a start			
	, Sec. Letter		T.16-S , R. 35-E , NMPM., Shoe Bar Devenian	Poo
Les				10-10-87
Please indicate location:			Elevation 3966 Total Depth 12780 PBTD	
	СВ	-T	Top Oil/Gas Pay_12700 Name of Prod. Form. Devonian	
			PRODUCING INTERVAL -	
┝ _╼ ┽		_	Perforations 12680-694, 12706-726 w/4 jet shots per foot	
E	₽ G.	H	Open Hole Depth Depth Depth Tubing	the state of the s
X			OIL WELL TEST -	
L	K J	I		Choke
		1.	Natural Prod. Test:bbls.oil,bbls water inhrs,	min. Siże
M	NO	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equa	- · ·
			load oil used): 336 bbls.oil, 96 bbls water in 24 hrs,	_min. Size_2"
			GAS WELL TEST -	
<u> </u>			Natural Prod. Test:MCF/Day; Hours flowedChoke S	Size
Tubing ,Ca	sing and Ceme	nting Reco		
Size	Feet	Sax	Test After Acid or Fracture Treatment:MCF/Day; Hours f	
1			Choke SizeMethod of Testing:	
13 3/8	310	400		
9.5/8	4900	6200	Acid or Fracture Treatment (Give amounts of materials used, such as acid, w	ater, oil, and
			sand): 5000 gai 15% agid Casing Tubing Date first new	
5 1/2	12766	900	Press. • Press. • oil run to tanks 10-21-57	
			Oil Transporter Texas-New Mexico Pipe Line Company	
-2 3/8	12723		Gas Transporter	
emarks:		K.WICh P	packer set. New rigging up to pump.	•••••••••••••••••
		••••••		••••••
••••••		••••••	Χ	
I here	by certify tha	t the info	formation given above is true and complete to the best of my knowledge.	
pproved	••••••		, 19. WRITTERN NATURAL CAR COMPANY	•••••
			(Company or Operator)	
01	IL CONSER	VATION	V COMMISSION By: (Signature)	
·	(_ / L	Acher The Office Manager	
y i			Send Communications regarding we	ll to:
Title	·····	//		
			Name. Western Natural Gas Company	<u>}</u>