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.

				•••	Artesia, M	BW MCX1CO		12/16/5	В
					(Place)			(Date)	
ARE	HEREBY F	REQUEST	ING AN ALLO	WABLE FOR	R A WELL KNO	OWN AS:	•		
月世:	sa metali	wrs, inc	•	rerris	, Well No	3	inNW	. <u>/</u> 4 SE	1/4,
J C	Company or O	perator) 18	_ 1AN	(Lesse)	, NMPM.,	e	an Iskas		
gjade L	Se	C	, T	., R	, NMPM.,	36V	TH LAKES	• • • • • • • • • • • • • • • • • • • •	.Pool
Mc	Kinley		County Das	e Spudded 12	2/8/58	Data Dellis	g Completed	12/15/58	
			Elevation	6515	Total	Depth 416	PRTD	416	
Pie	ase indicate	location:	Ton Oil/Gas P	av 402	Name o	of Prod. Form.	Mesa Ver	de	
D	C B	A							
			PRODUCING INT						
 	F G	H	Perforations_	NORE	Depth				
•	r G	п	Open Hole	14	Depth Casing	Shoe 402	Depth Tubing	390	
			OIL WELL TEST	-					
L	K J	I			bbls.oil,	LL!	. 24	C	hoke
							·		
M.	N O	P			Treatment (after			Chake	
•	.	•	load oil used):bb	ls,oil,	_bbls water in	hrs,	min. Size_	
	İ		GAS WELL TEST	-					
			Natural Paul				.		
			_		MCF/Da				
•	sing and Cer		Method of Tes	ting (pitot, b	ack pressure, etc	.):			
Size	Feet	SAX	Test After Ac	id or Fracture	Treatment:		MCF/Day; Hour	s flowed	
4/2"	402	12	Choke Size	Method	of Testing:		·		
	+								
					(Gi ve amounts of r	materials used,	such as acid,	, water, oil,	and
			sand):	None	Data first :	2014			
		1	Press. None	Press. No	Date first poil run to	tanks 12/	16/58		
			Gil Transport	er El Pa	so Natural G	as Product	Co.	garan sanga	
	_	1	1				para de la companya della companya d		
naeke :			•				7 M.		
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					and complete to			5 T	.*
proved	DEC 1	9 1958		, 19	Mesa Ret	bilers. In			• • • • • •
						(Company	r Operator)		
0	IL CONSE	RVATION	COMMISSIO	N	By: A sau	~ U. D.	uncon	<u></u>	
						(Signa	sture)	ノ	
Or	iginal Sig	ined Em	ery C. Arno	id	1 1000	etary	·····		
,	Supervisor				Send	Communication	ns regarding	well to:	
le	~ -F ~	- : II •	*************		Name Mesa	Retailers.	Inc.		
					Address 102	South Secon	dArtesi	a. N.N.	

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