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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Farmington, New Mexico February 4, 1958 (Place) (Date)
WE ARE	E HERE	BY REG	QUESTIN	NG AN ALLOWABLE FOR A WELL KNOWN AS:
				rborough - Federal Well No. 1 , in N 1/4 SE 1/4,
,	('00000000	A = () TABLE	****	(1)
Unit	Letter	, Sec	3	T23 - N , R 6-W , NMPM, Undesignated Pool
Rio A	rriba	•	**********	County. Date Spudded 10-31-57 , Date Completed 1-11-58
	lease ind			,,
D	С	В	A	Elevation 6789 Total Depth 6685 , P.B. 5623
E	F	G	Н	Top oil/gas pay 5540 Name of Prod Form Gallup
				Casing Perforations: 5540 - 5585
L	K	J	I	Depth to Casing shoe of Prod. String. 6685 OIL CON. COM.
		0		
M	N	O	P	Natural Prod. Test.
	1	1		based on bbls. Oil in Hrs. Mins.
L	1	<u> </u>	1	Sand-Oil-Frac
				Test after acid of thos. Swabbed 75 BOPD
	ing and (-	Based on 75 bbls. Oil in 24 Hrs Mins.
Size	F 	cet	Sax	Dascu on management of the state of the stat
13-3	13-3/8 325		360	Gas Well Potential
9-5	9-5/8 43 29		1750	Size choke in inches 2 Tubing
5-1	/2 66	851	625	Date first oil run to tanks or gas to Transmission system: 1-11-58
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Transporter taking Oil or Gas: Undesignated
Remarks	.No t	ransp	orter	has been assigned to move oil from this lease, but an
				ed so that we can obtain oil for treating wells on
other				
I he	reby cer	tify that	the infor	mation given above is true and complete to the best of my knowledge.
Approved		A A L		The Texas Company
				(Company or Operator)
	OIL CO	NSERV	ATION	COMMISSION By: (Signature)
C	leidina Indina	1 Sign	ed Eme	
By:				Title Dist. Supt. Send Communications regarding well to:
Title Supervisor Dist. # 3				Name H. F. Longren
				Address Box 817, Farmington, New Mexico

CONSERVA	TION COMMISSION
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