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Santa Fe	1	2
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U.S.G.S.		
Land Office		
Transporter	Oil	
	Gas	
Production Office		
Operator	3	

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.

Denver, Colorado (Place) 5-7-65 (Date)

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

Sentinel Petroleum Corp. (Company or Operator) Jicarilla Abel (Lease), Well No. 2, in SE ¼ ¼,

Tract 13 (Unit Letter), Sec. 31, T. 24, R. 4, NMPM., ~~South Blanco~~ Ballard Pool

Rio Arriba County. Date Spudded 3-1-65 Date Drilling Completed 3-5-65

Elevation 6876 GR Total Depth 2590 PBTD 2558

Top Oil/Gas Pay 2531 Name of Prod. Form. Pictured Cliffs

PRODUCING INTERVAL -

Perforations 2530-2531 4 holes, 2538-2548 20 holes

Open Hole no Depth Casing Shoe 2589 Depth Tubing 2503

OIL WELL TEST -

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

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: 1387 CAOF MCF/Day; Hours flowed 3

Choke Size .750 Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): _____

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

Oil Transporter _____

Gas Transporter _____

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

1082' FEL 1650' FSL
(Footage)

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	102	60
4 1/2	2589	80
1 1/4	2503	

RECEIVED
MAY 10 1965
OIL CON. COM.
DIST. 3

Remarks: _____

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

Approved JUN 28 1965, 19____

(Company or Operator)

By: _____ (Signature)

OIL CONSERVATION COMMISSION

Original Signed Emery C. Arnold

By: _____

Title Supervisor Dist. # 3

Title _____

Send Communications regarding well to:

Name Sentinel Petroleum Corporation

Address 1700 Broadway
Denver, Colorado 80202