NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR *** - (GAS) ALLOWABLE

New Well

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.

		-	•	Albuquerque, N. M. July 18, 1960
				(Place) (Date)
				E FOR A WELL KNOWN AS: [1dal, well No1-4, in. SE/_ SW/
(C	ompany or Op	erator)	(L	Lease)
N Sec 21		T 24N , R 1	W NMPM, Undesignated P.C. Pool	
Ric	a Arriba		C D . C	ded 6/28/60 Date Drilling Completed 7/4/60
			Elevation 7331 D	F Total Depth 3150 PBTD 3133
Please indicate location:		Top Oil/Gas Pay 30	Total Depth 3150 PBTD 3133 Name of Prod. Form. Pictured Cliffs	
D	C B	A	PRODUCING INTERVAL -	
			Perforations 3062	2 - 3080 with 4 SPF
E	F G	H	Open Hole	Depth Depth Tubing 3072
			OIL WELL TEST -	
L	KJ	I		Choke bbls.oil,bbls water inhrs,min. Size
				racture Treatment (after recovery of volume of oil equal to volume of
M	N O	P		Choke bbls,oil,bbls water inhrs,min. Size
1				DOIS WALES IN
	L		GAS WELL TEST -	
				MCF/Day; Hours flowedChoke Size
•	sing and Come	nting Recor		itot, back pressure, etc.): Back Pressure
Size	Feet	- CAX		racture Treatment: 3285 AOF MCF/Day; Hours flowed 3
8 5/8	95.86	60	Choke Size 3/4 M	Method of Testing: Back Pressure
			Acid or Fracture Trea	tment (Give amounts of materials used, such as acid, water, oil, and
4 1/2	3131.69	200	sand): 25,000	gals wtr & 25,000# snd.
1 1/4	3061	Tbg.	Casing Tubi	ing Date first new oil run to tanks
1 1/4	7001	108.	Oil Transporter_	
Remarks:	***		Gas Transporter	702
Cemarks :		***************		9,0 10 10
		******	***************************************	(3, 6, 6
				the second secon
1 here	by certify the	at the 1969	rmation given above is	true and complete to the best of my knowledge.
ipproved		***************************************	, 19	E. L. Fundingsland (Company or Operator)
0	II CONCED	NATION	COMMISSION	By: M. B. JONES Morris B. Jones
	Original Sig		COMMISSION	(Signature)
		-	***************************************	Title Consulting Engineer
•				Send Communications regarding well to:
Title	IROLEUM	ENGINER	R DIST. NO. 3	Morris B. Jones
			DIST. NO. 3	Name 6605 Rogers, N E
				Address Albuquerque, New Mexico

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OPERATOR

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