

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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.

P. O. Box 727, Earmit, Texas March 11, 1954
(Place) (Date)

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

Magnolia Petroleum Co. - Engstrom-Federal, Well No. 3, in SE $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)
I, Sec. 21, T. 24S, R. 2W, NMPM, Lindrieth Pool
(Unit)
Rio Arriba County. Date Spudded 9-24-52, Date Completed 11-2-52

Please indicate location:

Elevation 7155 Total Depth 3190' P.B. NoneTop oil/gas pay 3076 Prod. Form 3103Casing Perforations: None orDepth to Casing shoe of Prod. String 3060Natural Prod. Test None BOPDbased on — bbls. Oil in — Hrs. — Mins.Test after acid or shot — BOPDBased on — bbls. Oil in — Hrs. — Mins.Gas Well Potential Mole filled with water, temporary abandonedSize choke in inches NoneDate first oil run to tanks or gas to Transmission system —Transporter taking Oil or Gas None

Casing and Cementing Record

Size Feet Sax

10-3/4	287	120
7"	3060	135

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved _____, 19____
Magnolia Petroleum Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

Title _____

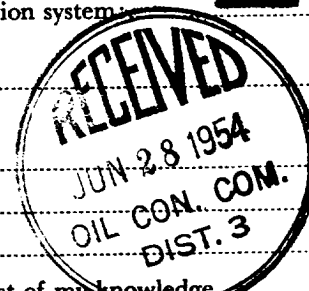
By: JTB

District Superintendent

Title _____

Send Communications regarding well to:
Magnolia Petroleum Company

Name _____

Address Box 727, Earmit, Texas

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>4</u>		
DISTRIBUTION		
	No. FURNISHED	
Operator	<u>1</u>	
Santa Fe	<u>1</u>	
Proration Office	<u>1</u>	
State Land Office		
U. S. G. S.		
Transporter		
File	<u>1</u>	<u>1</u>