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.

				Farnington,	New Mexico	••••••	\$-12-57 (Date)
ARE H	EREBY R	EOUESTI	NG AN ALLOWABLE	,,	IOWN AS:		(2227)
			Assount SF 07				
Con	npany or Op	erator)	(Le	ease)			, , ,
Unit Lett	, Sec	.9	, T2.6. H , R6	 , NMPM., . S			liffsPool
			County. Date Spudde	d 11-6 -51	Fr actured	Completed 1	-2 1-51
	e indicate l		Elevation 6514				_
			Top Oil/Gas Pay 28	Name	of Frod. Form.	stured Cli	ffa
D (C B	A	PRODUCING INTERVAL -				
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, ,		n.	Open Hole 2 877 1	2963 Casin	ng Shoe 2877	Tubing	2839
<u>. 1</u>	K J	Ī	OIL WELL TEST -				Choke
الد			Natural Prod. Test:	bbls.oil,	bbls water i	.nhrs, _	min. Size
*	N O	P	Test After Acid or Fra	acture Treatment (afte	er recovery of volu	ume of oil equa	l to volume of Choke
M	NO	F	load oil used):	bbls,oil,	bbls water in	hrs,	min. Size
			GAS WELL TEST -				
			_ Natural Prod. Test:	102 MCF/F	Dav: Hours flowed	24 Chake S	Size Mana
Mng Coef	ing and Cem	enting Reco		• • • • • • • • • • • • • • • • • • • •	_		
Size	Feet	Sax	•				
			Test After Acid or Fr	\			
8-5/8	456	175	Choke Sizence M	ethod of Testing:	enend into Son	thern Unic	n Ges Co.
/-			Acid or Fracture Treat	tment (Give amounts of	materials used, s	uch as acid, w	ater, oil, and
5-1/2	2877	200	sand): 8-3-57 4	2,900# 20-40 mm	nd and 30.00	O milens	vater
_			Casing Tubic Press. Press	ng Date first	. new		
1"	2439	 	_		canks		
		Ì	Cil Transporter		•		
			Gas Transporter Sec				- *-
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	deliver	Dility.		***************************************		***************************************	
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			ormation given above is		the best of my kr	nowledge.	
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OI	L CONSE	RVATION	COMMISSION	By Tu	(Signate	ure)	
Origin	al Signe	a Emer	y C. Armoid	TitleField	Sup. t.		COA
				Send	d Communication	s regarding we	ell to: 🦿 💆
le	ryisor Disc.	₩ U		Name Fran	k Gray		
				Address Box.	967, Farming	on, New Me	x100

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	OIL CONSERVA	TION COMMISSION		
-	AZTEC DIS	AZTEC DISTRICT OFFICE		
		No. Copies Received 4 DISTRIBUTION		
	L DISTR	IBUTION		
	DISTR	I NO.		
	DISTR Operator	NO.		
		NO.		
	Operator	NO.		
	Operator Santa Fe	NO.		
	Operator Santa Fe Proration Office	NO.		
	Operator Santa Fe Proration Office State Land Office	NO.		

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