## 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.

|   |                    |                       |                         | Parmington (Place)       | New Marico                           | October 13, 19<br>(Date) |  |
|---|--------------------|-----------------------|-------------------------|--------------------------|--------------------------------------|--------------------------|--|
|   |                    |                       | AN ALLOWABLE I          |                          |                                      | ,, <b>NP</b> ,,          |  |
| (Com                                      | pany or Ope        | rator)                | (Lea                    | use)                     |                                      |                          |  |
| <b>A</b>                                  | Sec                | <b>29</b>             | T 27N R 51              | , NMPM.,                 | Wildcat                              | Poo                      |  |
| (Unit)                                    | ,                  | •                     |                         |                          |                                      |                          |  |
|   |                    |                       | County. Date Spudded    | 9-69-73                  | , Date Completed                     | 7-17-03                  |  |
| Please                                    | indicate lo        | cation:               |                         |                          |                                      |                          |  |
|   |                    | x                     |                         | 59 G Total Dept          |                                      |                          |  |
|   |                    | <u> </u>              |                         | 4865                     |                                      | Messverde                |  |
|   |                    |                       | _                       | ns: <b>None</b>          |                                      |                          |  |
|   |                    |                       | Depth to Casing sl      | hoe of Prod. String      | 4825                                 |                          |  |
|   |                    | <u>:</u><br>          | Natural Prod. Test      | t                        |                                      | ВОРГ                     |  |
|   |                    | ;                     | based on                | bbls. Oil in.            | Hrs.                                 | Mins                     |  |
| 990'                                      | N, 990'            | ľ                     | Test after acid or      | shot                     |                                      | <b>B</b> OPI             |  |
| Casing and Comenting Record Size Feet Sax |                    |                       | Based on                | bbls. Oil in.            | Hrs.                                 | Mins                     |  |
| -5/8"                                     | 163                | 125                   | Gas Well Potentia       | al 1790 MCF/0            |                                      |                          |  |
| , ,,                                      | 4815               | 500                   | Size choke in inch      | nes                      |                                      |                          |  |
|   |                    |                       |                         | to tanks or gas to Trans |                                      |                          |  |
|   |                    |                       | Transporter taking      | g Oil or Gas:            | se Natural Gas                       | Company                  |  |
| narks:                                    |                    |                       |                         |                          |                                      |                          |  |
|   |                    |                       |                         |                          |                                      |                          |  |
| I hereby                                  | certify the        | at the inform         | nation given above is t | true and complete to th  | ne best of my knowled<br>Natural Cas | ge.                      |  |
| oroved                                    |                    | [6-                   | <u> 19 – , 195 .</u>    |                          | (Company or Opera                    |                          |  |
| OII                                       | CONSER<br>Original | VATION C<br>signed by | OMMISSION               | Ву:                      | (Signature)                          | LOUL                     |  |
| John J. Abendschan                        |                    |                       |                         |                          | Title. Petroleum Engineer            |                          |  |
|   |                    |                       | R DIST. NO. 3           | Send C                   | Communications regar                 | ding well to:            |  |
|   |                    |                       |                         |                          |                                      | - New Maria              |  |
|   |                    | •                     |                         | Address Bex 7            | y, reminere                          | a. New Mexico            |  |