NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (CODEX) - (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 peia at 60° Fahrenheit.

					(Place)			Novemb	(Date)
			ING AN ALLOW					SW	sv
THOUSEN	MDany OF O	ecum Comp perator)	any Jica	(Lesse)	, Well No	o	, in		1/41/4
			T. 27N			Blanco	Mesaver	de	Poo
Umi L	itter								
Rio Ar	riba		County. Date	Spudded	9-12-58	Date	Drilling (Completed	10-1-58
Plea	se indicate	location:	Elevation						
 	0 5		Top Gas Pay	5645	Nam	me of Prod	. Form. Ble	nco Mess	verde
D	C B	A	PRODUCING INTER	RVAL -					
			Perforations_	5645-4	6012	6 se	ts		
E	F G	H	Open Hole		Dep	th	6230	Depth	6011
			1		cas	ing Shoe_	0200	iucing_	0022
L	K J	I	OIL WELL TEST -	•					Choke
1	v l n	1 1	Natural Prod. I	[est:	bbls.oil,	bi	bls water i	nhrs,	min. Size_
9901	ľ	-	Test After Acid	d or Fracture	reatment (af	ter recov	ery of volu	me of oil ed	qual to volume of
M7	N O	P					•		Choke min. Size
99	0'	j	load oil used):	·			water in	nrs,	miii. 2126
			GAS WELL TEST -	•					
10 3/4"	İ	240	Choke Size 3/4						water, oil, and
7 5/8"		125	sand): 82.00	O gal wa	ter and 61	500 #	sand	20 0	gal MCA
5n	Top	205	Casing Press.	Tubing 3	500 Date fir	st new	**		
2"	3973 Bottom	225	-			to tanks			
5n	6230		Oil Transporter						······
	· 	.}	Gas Transporter					poration	
Remarks:		•••••••	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •				
••••••					• • • • • • • • • • • • • • • • • • • •		*****************		200 (200 C
I herel	by certify th	hat the info	ormation given ab	ove is true	and complete	to the bes	t of my kne	owledge. 📉	MON COM
Approved			ormation given ab NOV 7 1958	., 19		(C	ompany or (Operator)	
Ol	IL CONSE	RVATION	COMMISSION		Ву:		(Signatu	re)	
Origin	nal Signe	ed Emer	y C. Arnold		TitleD1	strict	Gas Supe	rintend	ent
′				******	Sei	nd Comm	unications	regarding v	vell to:
Title Supe	ervisor Dist.	, # 3							cty
					Address Bo	x 2406.	Hobba.	New Mex	ico
					Maar co				

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