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.

		-	•		, New Mest	lco 10/	27/58
				(Place)	011/21 4.0		(Date)
		•	ING AN ALLOWABLE I		_		
	ompany or Op		Sen Juan 26 -6 (Lea	· ·	bd	, in!	/459 /4,
-	Sec.		, T 271 , R 68	, NMPM.,	Blanco 1	iesa. Yexde	Pool
Rd	o Arriba		County. Date Spudded	9/13/53	Date Drill	ing Completed	11/13/53
	se indicate l		Elevation 6470	Total	Depth5	20 РВТО	
D	C B	A	Top Oil/Gas Pay 486 PRODUCING INTERVAL -	Name o	f Prod. Form.	Mose Verd	<u> </u>
E	F G	H	PerforationsOpen Hole	Depth	Shoe MT	Depth Tubing	E 1761
			OIL WELL TEST -	OBBING		rubing	3310
L	K J	I	Natural Prod. Test:	bbls.oil,	bbls wat	er inhrs,	Choke min. Size
M	N O	P	Test After Acid or Frac		•		Choke
			GAS WELL TEST -		_		
			_ Natural Prod. Test:	MCF/Da	v: Hours flow	ed Choke	Size
Subing Car	sing and Come	nting Reco					
Size	Feet	Sax	Test After the first				flowed 3
			Choke Size 🚅 Met				
10-3/	163	100					water oll and
7	47751	200	Acid or Fracture Treatme		materials use	u, such as aciu,	water, oil, and
_			sand): Shot: 24 Casing Tubing	Date first	new		
2	5376'		Press. 1083 Press.		tanks	11/55	
			Oil Transporter				
ļ	4 Novel		Gas Transporter E				nting
temarks:	•						-1-4-3
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	by certify th		OCT 31 1958 , 19			or Operator)	.blived \
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Original Signed Emery C. Arnold				TitlePxx	L. Boyd ' st duction B	orineer	⊡ST. 3
,	ervisor Dist.	# 3		Send	Communicat	ions regarding w	sell to:
				Name		······································	
				Address	••••••		