NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recommendations

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.

				(Place)	an, my maries	(Date)
ARE F	IEREBY RE	QUESTI	NG AN ALLOWABL	E FOR A WELL KI	NOWN AS:	
	Matural G mpany or Ope			-6 Unit, Well No. Lesse)	66(PM), in	<u> </u>
3	Sec	11			Wildcat	Poo
um w TA of	Her					mpleted 11-2-57
			County. Date Spud	dedAVT.AAT.71	1 Depth 5812	2000 0 5750
Pleas	se indicate lo	cation:				Pictured Cliffs
D	C B	A	PRODUCING INTERVAL -			
	x			424-3440; 3460-3	490	
	F G	H	Open Hole	Dept.	th ing Shoe 3587'	Depth Tubing 5645'
		1 }		Cast	ing silve	rubing
	KJ	+	OIL WELL TEST -			Choke
'	_		-			hrs,min. Size_
						e of oil equal to volume of Choke
	N O	P	load oil used):	bbls.oil,	bbls water in	hrs,min- Size
			GAS WELL TEST -			
O'N,	1650'E	·	_ Natural Prod. Test:	MCF/	Day; Hours flowed	Choke Size
ing ,Car	ing and Come	nting Recor	rd Method of Testing (pitot, back pressure, e	etc.):	
Size	Feet	SAR		Fracture Treatment:	1.368 MCF	/Day; Hours flowed 3
- /1.m	16:1	3.50	₹ .	_Method of Testing:		
3/4"	161'	150	-			ah as asid water oil and
5/8°	3577'	250	l l			ch as acid, water, oil, and
	1		sand): 22,260	bing Date firs	st new	
1/2"	2275'	300	Press. 1106 Pr	bing Date firs	to tanks	
1 /L#	5645'	•••	Oil Transporter	El Paso Hatural	GAS Promices :	APR.
<u>L/4"</u>		-	Gas Transporter	El Paso Hataral	Ser comband	/ OFF HVEN
arks:	Peker "	MAT. Pas	sker g 3669!; Ge	rrett.Sloove 6-3	1509!	Thullyti
•••••		•••••				0EC 12 /957
		••••				
I here	by certify th	at the info	ormation given above	is true and complete	to the best of my known	owielgoil CON. COM. Company DIST. 3
proved			DEC. 1. 2. 1957, 19		(Company or	Operator
				.	nal Signed D. C	Johnston
0	IL CONSEI	RVATION	COMMISSION	₽λ:·····Ωί‡δ.	Signatu (Signatu	re)
	4.40 -	1 .47	41. 4. .	Title Pets	roleum Engineer	
_	_	_	E.G. Amold	Se	nd Communications	regarding well to:
	-mises Diet	#3		_	a a	
le Sup	ervisor Dist.		•••••••••••••••	Name	S. Cherly	