

**NEW MEXICO  
OIL CONSERVATION COMMISSION**  
P. O. BOX 871  
SANTA FE, NEW MEXICO

GAS SUPPLEMENT NO. (NW) ~~(SIX)~~ **SP 2578**

DATE \_\_\_\_\_

**NOTICE OF WELL CONNECTION OR AUTHORITY TO ASSIGN ALLOWABLE  
ALL VOLUMES EXPRESSED IN MCF**

The operator of the following well has complied with all the requirements of the Oil Conservation Commission and may be assigned an allowable as shown below.

Date of Connection _____	Date of First Allowable or Allowable Change _____			
Purchaser _____	Pool _____			
Operator _____	Lease _____			
Well No. _____	Unit Letter _____	Sec. _____	Twp. _____	Rnge. _____
Dedicated Acreage _____	Revised Acreage _____	Difference _____		
Acreage Factor _____	Revised Acreage Factor _____	Difference _____		
Deliverability _____	Revised Deliverability _____	Difference _____		
A x D Factor _____	Revised A x D Factor _____	Difference _____		

SUPERVISOR, DISTRICT \_\_\_\_\_

**RECALCULATION OF SUPPLEMENTAL ALLOWABLE**

MONTH	% OF MO.	ALLOWABLE DIFFERENCE	MONTH	% OF MO.	ALLOWABLE DIFFERENCE
JANUARY			JULY		
FEBRUARY			AUGUST		
MARCH			SEPTEMBER		
APRIL			OCTOBER		
MAY			NOVEMBER		
JUNE			DECEMBER		

TOTAL AMOUNT OF (Cancelled or Additional) ALLOWABLE \_\_\_\_\_

PREVIOUS _____	NET ALLOW. _____	REVISED _____	NET ALLOW. _____
MONTH		MONTH	

PREVIOUS _____	CURRENT ALLOW. _____	REVISED _____	CURRENT ALLOW. _____
MONTH		MONTH	

EFFECTIVE IN THE \_\_\_\_\_ MONTH PRORATION SCHEDULE.

REMARKS: \_\_\_\_\_

**NOTICE OF SHUT-IN**

The following described well has been Shut-in for Failure of Compliance:

Purchaser _____	Pool _____	Date <b>8/25/61</b>		
Operator <b>EPNG</b>	Lease <b>Ballard P.C.</b>			
Well No. <b>50</b>	Unit Letter <b>H</b>	Sec. <b>22</b>	Twp. <b>26</b>	Rnge. <b>9</b>
Effective date of Shut-in <b>8/1/61</b>	Reason for Shut-In <b>Non-entailment of coverage</b>			

**(47950). This well will remain shut-in until further notice by the Commission.**

A. L. PORTER, Jr. *Director* **ORIGINAL SIGNED**

By \_\_\_\_\_ **BY FRED MARES**

GAS PRORATION SECTION

