NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (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 psia at 60° Fahrenheit.

				Farmington, (Place)	New Mexico	Novemb	er 5, 1959 (Date)	
FARF	HERERY P	EOUESTU	NG AN ALLOWABLE F	, ,	KNOWN AS:		(Dett.)	
l Peso		Cas Comp	emy Huerfane Unit	Well N		in SE	NW 1/4,	
		17	T 26N R 10	W, NMPM.,	Wildcat D	skets.	Pool	
um 14 Sex			County. Date Spudded	7 -2 9-59	Data Drillis	or Completed	8-18-59	
Please indicate location:			Elevation 6583 Total Depth 6			XPBI &C	.0. 6758	
			Top 0i1/Gas Pay 65701					
D	C B	A	Perforations	6570-6578; 6	6614-6623; 66; 5705-6714	30-6638; 66	68-6676;	
E	F G	Н	Open Hole Neme	Der Cas	oth sing Shoe 679	Depth Tubing	6719	
L	K J	I	OIL WELL TEST - Natural Prod. Test:	bble oil	bble water	r'in hre	Choke	
М	N O	P	Test After Acid or Frac	ture Treatment (a	fter recovery of vo	olume of oil equ	al to volume of Choke	
m	N O		load oil used):	_bbls,oil,	bbls water in	hrs,	min. Size	
550'N.	1650'W		Natural Prod. Test:	MCF	F/Dav: Hours flower	d Choke	Size	
-		enting Recor						
Size	Feet	Sax	Test After Acid or Frac				flowed 3	
10 3/4	321	293	Choke Size 3/4" Met					
7"	6765	360	Acid or Fracture Treatme					
			sand): 23,200 gal.	eil & 25,000	of sand & 23,	000 gal. ei	1 & 25,000# 8	
2"	6719		Casing Tubing Press. Press.					
2"	5881		Oil Transporter El P			///	PEHA	
		<u> </u>	Gas Transporter 31				PFIAFU	
marks:	Guibers	en "AG" F	roduction Packer s	35 85 2924		Nov	5 1050	
		••••••	••••••	•••••	***************************************		40.17	
						handle Di	ON. COM.	
I herel	by certify the	hat the info	rmation given above is tr	ue and complete	to the best of my		/	
proved		NUY	959 , 19		(Company	o. Op.,,	n ne	
Ωī	IL CONSE	RVATION	COMMISSION	By:	By: Criginal Signed C. D. COX			
			C. Arnold	•	(Sign	ature)		
				Title Petr	eleum Engine	ne remading w	ell to:	
·la	\$	Supervisor [)ist. # 3		nd Communication			
				Name	Name R. S. Oberly			
				Address Bo	x 997, Farmit	igton, New 1	lexice	