## 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

ARE	HERE	BY REQ	QUESTIN	G AN ALLOV	WABLE FOR	(Place) A WELL KNO	OWN AS:		(Date)
(C	Sompany	or Opera	Gas Co.	Euer:	(Lease)	, Well No	31-33 Sallas		
Umit I San J							, Date Comple		Pool <b>55</b>
Ple		icate loc		County. Date	e spudded				***************************************
D	C	В	A	Elevation	<b>650</b>	<b>6</b> Total Dep	234 th	• , P.B	
	F	G	Н	Top oil/	gas pay	<b>84 '</b> N	ame of Prod. F	ormP	.C.
				Casing P	erforations:	No			or
L X	K	J	I	•	<u> </u>	oe of Prod. String			
ч	N	O	P				······		
700		1	<u> </u>				<b>L</b>		
	B, 990			Test afte	er acid or shot				<b>B</b> OPD
Castn Size	-	P <b>ementin</b> ; Ecct	Record Sax	Based on	1	bbls. Oil in	<b>L</b>	Hrs	Mins.
-/(	011	3021	70	Gas Wel	l Potential	2193 MC	<b>P</b> /D		/RFT
<b>-</b> 5/8	Ť	103'	70	Size cho	ke in inches		3/4"		
-1/2 ."	<del></del>	22841	100	Date firs	it oil run to tan		nsmission system:	Tied in	COM
· 		2331 '		Transporter taking Oil or Gas:					0/87
ihere I her roved	herfore reby ce	iturel mite i El Par rtify that	the infor	al Gas Co. mation given a JUL 9 1957	will be the above is true as, 19	ell with new within the operator.	the best of my kn  Il Paso Hat  Changed to the best of my kn  Il Paso Hat  Company or  (Signature Petroleum E	o the RI Pa e Huerfanit owledge. ural Gas Co Operator)	so Natural O Unit
Ori	iginal	Signe	1 Emery	C. Arnold	<u> </u>	TitleSend	Communications		to:
e Supervisor Dist. # 3						20.14	E. J. Coel		

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