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NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

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.

a module	SURER CAIRS.	Que muse	be reported on 1		Farmingto (Place)	· • • • • • • • • • • • • • • • • • • •	xico	Decembe	T 12, 1960
Paso Na	tural Gas	s Compan	G AN ALLOW, y Blanco De	velop me n	t 27-9 ₆₁₁	No 3~⊥	in	SW	SW
(Com	pany or Oper	ator) L	T. 27-N	(Lease) R 9-W	NMPM.	Blanco	Mesa Ve	rde Ext	Po
um Lan 1 Juan			County. Days Elevation Top Oil/Gas Pay	pudded	9 -22- 60	Data	Drilling Co 669	pleted . PBTC	9-29-60 4631
Please	indicate loc	ration:	Top Oil/Gas Pay	4457 '(P	erf)	Name of Frod.	Form. Me	sa Verde)
D C	В	A	PRODUCING INTER	<u>val</u> 4457- 554-4560	.4463;4460);4571-457	3 -440 6;450 79;4590-45	1 -4 510;4	·JZT=47K)	*;+75 +=+ 7 +
E F	G	Н	Open Hole	None		Depth Casing Shoe	4665	Depth Tubing	4601
L K	J	I	OIL WELL TEST - Natural Prod. T	est:					
M N	0	P	Test After Acid						Choke
) 8, 900	O W OOTAGE) ng and Gemen	ting Record	Natural Prod. T	est:					
0 3/4"	161	196	Method of Testi Test After Acid Choke Size 3/1	or Fractur Method	e Treatment:	Calcula	ated A.O	.F.	110wed_
7 5/8"	2329	121	Acid of TOOU	egala tment	or & 60° ut	oof#attid	s used, suc	h as acid,	water, oil, an
5 1/2"	2431	230	Casing 1083	Tubing10	24 Date f	First new un to tank _ . Ges Prod	note Com	ADT H	
2"	4601		Oil Transporter Gas Transporter	El Pas	o Natural	Gas Comp	any	TI.	
marks:							<u>-</u>)EC 1 5 1	
I hereb	y certify tha	t the infor	mation given ab	ove is true	and comple	te to the best	of my know Natural	OIST. wledge. Cas Con	
-			COMMISSION		By: Origin	(Co nal Signed By	ompany or O	m	
			COMMISSION				(Signatur	()	
			C. Arnold			Send Comm S. S. Ober	unications 1	regarding v	vell to:
ne gue.	visoi Dist. #					Box 990,		on, New	Mexico

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