## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

## 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.

			***************************************	12-13-54 (Date)	
E ADE III	EDEBY D	EOUESTIN	(Place) G AN ALLOWABLE FOR A WELL KNOWN AS:	(Date)	
			Eargrave , Well No. 16 , in 165	1/2 SE 1/	
(Com	pany or Op	erator)	(Lease)	-/4/	
			T. 27.1 , R. 10 , NMPM, utz-Folcher	Poo	
(Unit)					
			County. Date Spudded. 25-51, Date Completed. 26-5	<u>?</u> ±	
Please	indicate l	ocation:			
			Elevation 6071 G Total Depth 2081 , P.B.	,	
		-	Top oil/gas pay2007	3	
		!	Casing Perforations:		
			Depth to Casing shoe of Prod. String2011		
			Natural Prod. Test. 250 MUF	BOP	
			based onbbls. Oil inHrs	Min	
		******	Test after acid or shot	ВОР	
Casing a	nd Cement	ing Record	- III 011	Min	
Size	Feet	Sax	Based onbbls. Oil inHrs	N1111	
2-5/0H	105	60	Gas Well Potential 1700 CF		
<b>5</b> ½	2011	155	Size choke in inches		
1"	2069		Date first oil run to tanks or gas to Transmission system:6-22-5		
			Transporter taking Oil or Gas: Southern Union das Gana	2 3 4 5 6 1 1 11	
				1.14.1.1954 EC 1.1954	
emarks:			(Q)	10,00	
			0	EC 1 200	
7 1 1			in the period of my knowledge	, CO, 3	
1 nereby	certify th	nat the infor	Harris given above is true and complete to the sect of my mountain	ST. OLD	
pproved		<u> </u>	mation given above is true and complete to the best of my knowledge.  1954 ,19 Three States Hatural Das Company or Operator)		
			COMMISSION By: Apr Caulthus		
			(Signature)		
y:	nai Sigr	ied Emer	y C. Arnold Title Send Communications regarding	.11	
Cil	and Gas	Inspector	Send Communications regarding  Dist #3,	well to:	
itle		opecial	Name. Three States Naturalas		
			AddressBox67FarmingtonDev	Mexico	

No. Cor	pies Rec	aived	4
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