

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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

P. ALAMITOS, NEW MEXICO May 19, 1959
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

ALAMITOS OIL & GAS COMPANY (Company or Operator) C. CLARKSON (Lease), Well No. 10, in NE $\frac{1}{4}$ NW $\frac{1}{4}$,

C (Unit Letter), Sec. 24, T. 20N, R. 10W, NMPM, Aztec Ex. Pool

San Juan County. Date Spudded 1/30/59 Date Drilling Completed 5/5/59
Elevation 5770 Total Depth 1972 PBD 1962

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 1908 Name of Prod. Form. Plotted Bluffs

PRODUCING INTERVAL -

Perforations 1910 to 1913
Open Hole _____ Depth _____
Casing Shoe 1909' Tubing 1932'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 16.53 MCF/Day; Hours flowed 3 hrs.

Choke Size 1/16" Method of Testing: Back Pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Frased with 10.75 gal. water, 60,000 sand
Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter South on Union Gas Company

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved MAY 29 1959, 19 59

OIL CONSERVATION COMMISSION

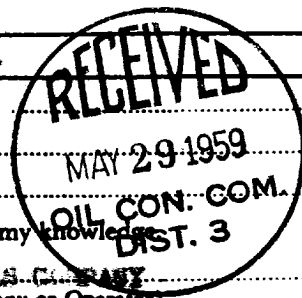
By: Original Signed Emery C. Arnold
Title Supervisor Dist. # 3

By: ORIGINAL SIGNED BY JOE C. SALMON
(Signature) JOE C. SALMON

Title INFORMATION ATTACHED AT
Send Communications regarding well to:

Name ALAMITOS OIL & GAS COMPANY

Address Box 710, Alamitos, N.M. 87100



OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received		6
DISTRIBUTION		
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Secretary	1	
Records Mgr.	1	
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Asst. Dir. of Geol.		
Transporter		
File	1	✓