NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (COLLE) - (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	Mext.co	Februs	Date	1961
					R A WELL KI			SE		
Co N	mpany or Op	1		/ T \	okin, Well No.					
Unit Let	tter		County D	ate Spudded	January 22, 1	1963 _{00 to}	Drilling C	Campleted Fo	bruary	
	se indic at e l		Elevation_	2272 (GT)	Tota Name	l Depth_	4()	FBTU	1	
D	C B	A		MTERVAL - Per	Forated 6356- shots per fo	-6369,				t h
E	F G	Н	Perforation Open Hole	s	Dept) Casi		6475	Depth Tubing	6345	
L	K J	I	OIL WELL TE		bbls.oit,	£	lis water in	nhrs,	min. S	Dhoke Dize
M	N O	P			re Treatment (afte				Choke	٠
Sect	ion 35		GAS WELL TE	=	,					
	ing and Ceme	nting Recor			MCF/:				Size	
Size		SAX			back pressure, e re Treatment: 5	-			Caras 3	hours
B-5/8*	514	350			d of Testing:					
4-1/2#	6502	525	Acid or Fra	cture Treatment	Give amounts of	f materia	als used, su	^{ch} (5৩০ g	allons)	án:
2-3/8"	6368		Casing Press.	Tubing Press	Date first oil run to	t new o tanks				
					ateau Inc.					
			Gas Transpo	rter South	ern Union Ga	s Com	eny		·	
emarks:	Complete	d Februa	гу 14, 196	l, as shut	in Basin Da	kota I	ield Der	relopment	well.	
		, 5216 M	CF per day	. Tubing	pressure flo	wing A	.00 ps1,	casing p	ressure	
	925 psi.									
				above is true	Pan Americ	an Pot	roleum	Corporati		
OI	L CONSEI	RVATION	COMMISSI	ON	Ву:	***************************************	Signatu	re)		
v: Origin	nal Signe	d Emery	G. Amol	d	Title Admin	istrat	tive Cle	regarding w		
_{itle} Supe	rvisor Dist.	# 3			Name Pan					1
					Address Box	480,	Farmingt	on, New M	fext co	

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