NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

			·	Farmington	a, New Mexico	1	2-30-60 (Date)
WE ARE I	HEREBY RE	QUESTI	NG AN ALLOWABLE FO	R A WELL KNO	OWN AS:		(55)
	SO Natural		Hughes (Lease)	. , Well No	2 , in	N E 1/4	NE 1/4,
A translation	, Sec	19	T 29 R 8	, NMPM., I			Pool
•			. County. Date Spudded			mpleted	11 7 60
	se indicate loc		Elevation 6522				
		Tor 011/Gas Fay 4725		•			
D	C B	A	PRODUCING INTERVAL -				
		<u>x</u>	Perforations				
E	F G	Н	Open Hole	Depth Casing	Shoe 4682	Depth Tubino	5315
			OIL WELL TEST -				
L	K J	I P	Natural Prod. Test:	able ail.	htle water in	bes	Choke
			Test After Acid or Fractur			_	-
M	N O		load oil used):b			•	Choka
		L	GAS WELL TEST -				min Size
 			Natural Frod. Testi	wee/n			
Tubing Cas	sing and Cement	ing Recor					
Size		SAX	Test After Acid or Fracture				
			Choke Size Method				
10-3/4	167	150					
7	4682	250	Acid or Fracture Treatment			h as acid, wa	iter, oil, and
			sand): Casing Tubing Press. Press.	⊍ate first n	ew	 	
2-3/8 5315			Fress. Press.	oil run to t	ank s		
			Cil Transporter		•		
h	A T		Gas Trunsporter El P				
Remarks:	AD AD	ATMT NO	r was installed. Tu		a a servicia cassar. An		1.00
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I hereb	nu carrifu that	the info	rmation given above is true		he hest of my know	wisdag (LUI	
Approved	JAN	5 1961	19		Natural Gas	4 4 4 4 1 1	5 1988
· · · ppioved			1 12	08	Company or O	ped for	Of Comy
OI	L CONSERV	ATION	COMMISSION	By. 1331	Soud		
ong	unal Signer	i bener	y C. Arnela		Signatur		
By:			*****************************		nction Engine Communications r		l to:
Title	Superviso	or Dist. #	: 5 	Schu (e communications	- (1,	
				Name	\$ 244.4		

Address.....

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PRORATION OFFICE	2.00		
OPERATOR			

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