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.

Farmington, New Mexico

Harch 13, 1959

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				(Place)				(Date)
			ING AN ALLOWABLE					
10	AMBARN AF	()massass \	pany San Juan (L	****				
1		Sec. 33	T. 291 , R.	9W NMPM	Ast	ee P. C.		Pool
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			County. Date Spudd	led	Dat	5038	completed	3005
Plea	ase indicat	te location:	Top Oil/Gas Pay 2		otal Depth	70,30	H etatang	
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			PRODUÇING INTERVAL -	o oroć			•	
E	F	G H	Perforations 255		Depth		Depth	
_	-	- -	Open Hole No.	rice C	asing Shoe	2705	Tubing_	2545'
. 			OIL WELL TEST -	•				 .
L	K	JI	Natural Prod. Test:	bbls.oil,	t	bls water in	hrs,	Chokemin. Size
K			Test After Acid or Fr		• .			
M	N	0 P	load oil used):					Choke
	ŀ		GAS WELL TEST -					
78018	830'W							
	-		_ Natural Prod. Test:				Choke	Size
mng ,Ga Size	sing and the Feet	Cementing Reco						
		_	Test After Acid or Fr	_				flowed
3/4"	146	200	Choke Size 3/4" M	Method of Testing:_	carter)	Lated A.O	·Ę ·	
7"	270	5' 500	Acid or Fracture Trea	tment (Give amount	s of materi	als used, su	ch as acid,	water, oil, and
				gal. water &				
5#	2451	200	Casing Tubi Press. 705 Pres					
	+		Oil Transporter El				Dany	
2 "	2545	5'	Gas Transporter R1					
4	his wal) was ard	Gas Transporter alginally drilled by				a 29-9 U	ait No. 2.
			pany has purchased					
kKMRS atzıral	fies Co	many Sen	Juan 29-9 Unit He	2. El Pas	o Natur	1 Gas Co	. vill b	the operat
•••••••	•••••		***********************************					OFIL.
I here	by certify	that the info	ormation given above is	true and complet	e to the be	st of my kno	Wieds	1.511/52
proved	•••••	***************************************	MAR 1 8 1958 , 19		7.条码、Q等极飞))	Company or C	perator)	OFIA FD /
_				_		Company or C NED J.J. T	ILLERS OF	21.8 1950
O	IL CONS	ERVATION	COMMISSION	Ву:		(Signatu	e) OII 6	ON. COM.
Orig	tinal Sig	ened Emer	ry C. Arnold	Tisla Pet	roleum l	ngineer	/ " "	IST, 3
Supervisor Dist. # 3			mm. PHAPPE	1100	Send Comm	nunications	regarding w	rell to:
				B.	Name E. S. Oberly			
								Manual e-
				Address	0x 997,	Farmingt	on, Mov	MEX1.60

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