## REQUEST FOR (QLL) - (GAS) ALLOWABLE

New Well Reconstitution

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. Cas must be reported on 15.025 mia at 60° Fahrenheit.

					Farmington, (Place)	NewM	lext.co	Deca	mber 23 <sub>a</sub> (Date)	1957
WE ARE H	IEREBY R	EQUEST	NG AN ALLOV	VABLE FO	R A WELL K	NOWN	AS:Pan	American	Petrole	1370
- (Co	mpany or Op	erator)	Gas Unit MO	(Lease)					•	,
H Uan Le	, Sec	32	, T29N	R <b>9W</b>	, NMPM.,	Blanc	o-Mesave	erde	••••••••••	Pool
San Jua	n		County. Date							
Pleas	se indicate l	ocation:			Tota					
D	C B	A			Name					
			Perforations	16, 4243-	shots per f -56, 4324-36	oot 47 6, 43 <b>6</b> 6	11-37, l -84, 440	4751 <b>-6</b> 2, 64 <b>-8</b> 8, 4	.4779-85 1.50 <b>9-</b> 21	, 4206 <b>-</b> 1560-70
E	<b>F</b> ⋅G	X	Open Hole		Dept Casi	h Ing Shoe	48591	Depth Tubing	48301	
L	K J	I	OIL WELL TEST	-					,	Choke
	. 5	<b>_</b>	Natural Prod.	Test:	bbls.oil,	bb	ols water in	n hrs	,min- :	Size
М	N O	P			e Treatment (aft				Choke	•
	l		GAS WELL TEST		bls.oil,	DDIS W	water in	nrs,	min. Size	<del></del>
Section	32	<u></u>			MCF/	/Dave Hous	e flawed	Chak	o Cino	
Tubing Cas	ing and Gem	nting Reco			back pressure, e				e 312e	
Size	Feet	Sax			e Treatment:				s flowed 3	hours
10-3/4"	2991	240	i		of Testing:					
7-5/84			Acid or Fractur	re Treatment	(Give amounts o	f materia	ls used, su	ich as acid	, water, oil,	and
	-	<u> </u>	sand): 70,0	M_gallor	Eate firs	<u>, 20, 00</u>	O pound	- sand, -		
5-1/2 <sup>M</sup>	2247	250								
2-3/8#	48301		1		ates-Wester					Truck
<b></b>		<b></b>	_		Natural Ga	-	•			
			£ 5-1/24.0D,							
			bing, Preli						npe Nevan	rement
			ormation given al					<i>2</i>		
			given a						ration	
				,	ORIG	U) LINAL	ompany of C SIGNED	Derator f.		
			COMMISSION		Ву:	D. J.	COST	re) 🦠 🦠		
By: (37 - 15	eni Mane	d Emer	y C. Arnold	******	Title Fiel	d Cler	k	********** <b>*</b>		
Title	ervisor Dist	. # 3					unications			
					NamePan	Americ	an Petro	Leum Co	<del>rporatio</del> r	1
					AddressBox	c.487.,	Farming	on, New	Mexico	

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