FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRORATION OFFICE			
OPERATOR			

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

12-25

New Well
Recompletion

RECEIVED
JUL 12 1961

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.

(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: 12-25

(Company or Operator) (Lease), Well No., in ¼ ¼,

Unit Letter, Sec., T., R., NMPM., Pool

County. Date Spudded. Date Drilling Completed

Please indicate location:

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

(FOOTAGE)

Elevation Total Depth PBTD

Top Oil/Gas Pay Name of Prod. Form.

PRODUCING INTERVAL -

Perforations

Open Hole Depth Casing Shoe Depth Tubing

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 load oil used): bbls.oil, bbls water in hrs, min. Choke 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: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Press. Tubing Press. Date first new oil run to tanks

Oil Transporter

Gas Transporter

Tubing, Casing and Cementing Record

Size	Feet	Sax

Remarks:

JUN 8 C 1961

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 30 1961, 19

(Company or Operator)

OIL CONSERVATION COMMISSION

By: COPY (ORIGINAL SIGNED) R. M. BRADLEY
(Signature)

By: Emery C. Arnold

Title Supervisor Dist. # 3

Title

Send Communications regarding well to:

Name

Address