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## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

## REQUEST FOR (OTT) - (GAS) ALLOWARLE

New Well Meddelpheilde

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.

		-	Hobbs, New Mexico					
	(Place) E HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:							(Date)
		•					CB 1/	<b>VIV</b> 1/
	npany or O			(Lease)	, Well No	<del></del> , in.	/4 .	
P	F Sec. 18		T 29N	, R. 10W	, NMPM.,	Undesign	ated (Dake	eta) Pooi
Unit Lot				1	1060	Parks Park 114 may 0		11-26-60
						Date Drilling O		
Please indicate location:					of Prod. Form. Und			
D (	C B	A	PRODUCING INT					
					540			
E	F G	H	Perforations_	6408-6	Depth	g Shoe 6646	Depth	6:374
	×		l		Casin	g Shoe	lubing	0.517
L	K J	I	OIL WELL TEST	•				Choke
	_   `					bbls water in		
<del>,,</del>			T <b>es</b> t After Ac	id or Fracture	Treatment (afte	r recovery of volum	ne of oil equal	i to valume of Chake
M	N O	P	load oil used	bbbb	ls,oil,	bbls water in	hrs,r	nin- Size
			GAS WELL TEST	<b>-</b>				
			Natural Prod.	Test:	MCF/D	ay; Hours flowed	Choke S	i ze
	FOOTAGE) ing and Cer	menting Reco	rd Method of Tes	ting (pitot, b	ack pressure, et	c.):		
Size	Feet	Sax	Test After Ac	id or Fracture	Treatment:	<b>4257</b> MCF	Day; Hours f	lowed
13-3/8	137	150	Choke Size 3	/4Method	cf Testing:	tulti-point be	ck pressu	<u>:e</u>
			<del> </del>		16' of	materials used su	uch as acid. wa	ter, oil, and
4-1/2	6646	950	sand):300 g	ir 17.5%	CA acid, 60,	materials used, su 000% sand & 5	6,798 gal.	water w/
2-3/8	6374		Casing	Tubing	Date first	new 950# WAC tanks 12-12	No. 8 gel	agent
		<del></del>				rucks		
	ļ		•					Mariana Anna Maria
	<del></del>					Gas Co.		. T (6
emarks:		*****	***************************************			•••••	/ N. L.	
						••••	, VTV3E	
							1	
I hereb	by certify t	that the ini	ormation given	above is true	and complete to Tidewat	the best of my known	Y THE COM	te de la composition
pproved		1301	••••••	, 19	***************************************	(Company or	Operator)	
				<b>3.</b> 7	B	Original Signed By:		***********
			I COMMISSIO		Ду	(Signatu	ure)	
Orig	inal Sig	ned Eme	ry C. Arnol	d	Title	Area Supt.	·····	
/: <del></del>	_				Send Communications regarding well to:			
itle	Supervis	or Dist. # .	3		NameTI	homas E. Weave	:I	
					Address Bor	547. Hebbs. 3	i. Nex	

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