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	GAS		<u> </u>		
PRORATION OFFICE					
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## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWAPLE



New Well X 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.

	ic sever	-	Albuquarque, New Marrico February 27, 1962 (Date)
LOFT	FRERY F	REOUESTI	ING AN ALLOWABLE FOR A WELL KNOWN AS:
Royal I	evelennen	t Company	, Well No, in
(Co	mpany or O	Derator)	(Lease)
	\$, Se	c <b>17</b>	T. 29N , R. 18W , NMPM., Shipreck-Galler Poo
UMN LA			County. Date Spudded December 18, 1961 Date Drilling Completed 12-29-61
			Elevation Sies C. Total Depth 920 PBTD
Plea	se indicate	location:	Top Oil/Gas Pay 721 Name of Prod. Form.
D	C B	A	PRODUCING INTERVAL -
			PRODUCTIO TREATME
E	F G	H	Perforations Depth Depth
		<b>"</b>	Open Hole 72 to 72 Casing Shoe 71 Tubing 77
L_			OIL WELL TEST - Choke
L	K J	I	Natural Prod. Test: bbls.oil, 700 bbls water in 24 hrs, min. Size
Ì		X	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
M	N O	P	Choke load oil used): bbls.oil, bbls water in hrs, min. Size
			GAS WELL TEST -
	(FOOTAGE)		Natural Prod. Test: MCF/Day; Hours flowed Choke Size
ubing ,Ca	sing and Ce	menting Reco	
Size	Feet	SAX	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
			Choke Size Method of Testing:
5 <u>1</u> 0	71'	+	and a series water oil and
2"	77'	Name	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):
2-	<del>- "</del> -	24400	Day First 200
		Ì	PressOll run to tanks
	<del></del>		Gil Transporter Industrial Gil, Inc., Salt Lake City, Utal
			Gas Transporter
emarks:			\KTPT\FD\
CINALES		•••••	MADO
•••••••		•••••	MAR8 1962
			nformation given above is true and complete to the best of my knowledge. COM.  DIST. 3
I her	eby certify	that the in	formation given above is true and complete to DIST. 3
pproved.	MAK 8	1904	(Company or Sperator)
			Bu-
C	OIL CONS	ERVATIO	DN COMMISSION  By:  (Signature)
		enad Day	C. A ald
y:() <del>ri</del>	ginal.51	gnea con	Send Communications regarding well to.
itleSu	nervisor.Di	st. #.3	NameAbove
		•	Address