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OPEUATOR			-				

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

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.

			Denver, Colorade(Place)				1-4-62 (Date)	
		_	ING AN ALLOWABLE FOR					
	EXPLOR mpany or Op		INC. Federa	1, Well No1=	-31A , in.	5 R	4N.B1/4.	
	Sec		T. 30 N, R. 13 W	, NMPM., B s	sinDal	ota	Pool	
•			County. Date Spudded1	0-1-61	Date Drilling (Completed	10-16-61	
	se indicate l		Elevation 5314 GL	Total Dep	oth <u>5975</u>	PBTD		
D	C B	A	Top Oil/Gas Pay 5686 PRODUCING INTERVAL -	Name of I	Prod. Form.	Akota		
				. 591 <i>A</i>				
E	F G	Η×	Perforations 5686 = Open Hole	Depth Casing St	hoe 5975	Depth Tubing	57 95	
			OIL WELL TEST -					
L	KJ	I	Natural Prod. Test:	bbls.oil,	bbls water i	nhrs,	Choke min. Size	
M M	N O	P	Test After Acid or Fractur				Choke	
			load oil used):b	DIS,011,D	bis water in	mrs,	min. 3126	
			GAS WELL TEST -	une /n	Union a El accad	Chales	Si-a	
	FOOTAGE)	enting Reco	Natural Prod. Test:				51 Ze	
Size	Feet	SAX	Test After Acid or Fractur				flowed 3	
8-5/8"	203	75	Choke Size 3/4" Method					
5-1/2"		152	Acid or Fracture Treatment sand): 250 gal BDA	(Give amounts of mat	terials uséd, su	uch as acid,	water, oil, and	
			Casing Tubing Press. 1856 Press.					
2-3/8#			Oil Transporter Pla	_				
			Gas Transporter E1 2	•		(AE)		
emarks:			Ods 118115por co.			12fl.t	INFD/	
·····		•••••				/ (LUL	1067	
	·····					JANS		
I herel pproved	by certify to JAN 8 1	0E2	ormation given above is true	COMPASS EX	PLORATION	i. Inchi	N. COM	
	II CONSE	DVATION	N COMMISSION	By: 1.0	Company or Danel	Marie Control	and the same of th	
				Chi-f	(Signati	age)°		
y: Origi	inal Sign	ed Eme	ry C. Arnold	Litte	Geologia ommunications		vell to:	
itle Supe	rvisor Dist.	#3		Name P. J.	Farrelly	<u> </u>		
				101 U	niversity	y Bouler Wrado	rrid	

STATE OF DEPT (ISSUED)

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AND COLUMN STATE

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