NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

| | | | | (Place) | | | Lg1.960 |
|---|--------------|---------------------------------------|---|---|--------------------------------------|-----------------------------|-----------------------|
| WE ARE | HEREBY | REQUESTI | NG AN ALLOWABLE | FOR A WELL KN Ute Mtn. Tri | NOWN AS: Lba l 2-2 9 | NTF 1/ | o ter 1/ |
| | Company or C | | (Les | Me) | ······· y ············, w | ·······/4········ | 374 ····· /4 , |
| Unit Letter , Sec.29 | | | T. 31N, R. 11N | Verde Gellu | Lup Pool | | |
| San J | ian | · · · · · · · · · · · · · · · · · · · | County. Date Spuddee | d | Date Drilling | Completed 4-21- | 60 |
| Please indicate location: | | | Elevation 5562 | Total | Depth_3689 | PBTD None | |
| D | CE | 3 A | Top Oil/Gas Pay 3651 | Name | of Prod. Form. 🚱 | llup (Tecito) | |
| | | ' ^a | PRODUCING INTERVAL - | | | | |
| | • | | Perforations None | | | | |
| E | F G | H | Open Hole 3609-365 | Depth | ng Shoe 3600 | Depth Tubing 2668 | |
| | | | OIL WELL TEST - | | | | |
| L | K J | I | | A 151 - 121 - A | | | Choke |
| ł | | | Natural Prod. Test: | ·. · | | | |
| M | N O | P | Test After Acid or Frac | | • | · c | hoke |
| | | | load oil used): 102 | bbls,oil, | bbls water in | hrs, nmin. S | ize p |
| | | | GAS WELL TEST - | | | | |
| Se | a. 29 | | Natural Prod. Test: | MCF/D | Day; Hours flowed _ | Choke Size | |
| tubing ,C | asing and Ce | menting Reco | rd Method of Testing (pito | ot, back pressure, et | .c.): | | |
| Size | Feet | Sax | Test After Acid or Frac | cture Treatment: | MC | F/Day; Hours flowed_ | |
| | | | Choke SizeMet | thod of Testing: | | | |
| 8 5/8 | 130 | 100 | | | | | |
| 53 | 3609 | 200 | Acid or Fracture Treatm | | | uch as acid, water, d | oli, and |
| | | | sand): 100 Fhla C Casing Tubing Press. Press. | Date first | new | 0.15 | |
| 4 | 148 | None | PressPress. | oil run to | tanks5 | 8760 | |
| 2 3/8 | 3660 | None | Oil Transporter | 7 Peso Natural | . Gas Produote | - 60 OF 1 1 1 1 / | |
| | | | Gas Transporter | | | / NLULIY | m> |
| Remarks: | | | | ••••• | | MAY1 2 10 | oeo) |
| • · · · · · · · · · · · · · · · · · · · | | •••••• | ••••• | • | •••• | | |
| | | | ••••• | | ······ | OIL CON. C | OM./ |
| I her | eby certify | that the info | ormation given above is t | rue and complete to | the best of my kn | owledge. | |
| Approved | ••••• | Ma Y | 1 5 1566 , 19 | Stand | ard Oil Court | Doerator) | |
| | | | | _ | auto | France | |
| (| DIL CONSI | ERVATION | COMMISSION | Ву: | (Signati | ure) | |
| By: Or | iginal Si | gned Eme | ery C. Arnold | Title | Field Foreman | | |
| , | : D:-4 | . # 3 | *************************************** | Send | Communications | regarding well to: | , |
| Title Sup | ervisor Dist | . # 5 | | Name | | | |
| 14 | | | •. | | | | |

| STATE | OF NEW | A"E"C | ca | | 7 |
|---------------|----------------------------|----------------|----------------|---|---|
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| U.S.G.S. | | - | -4-1 | | 4 |
| LAND OFFICE | | · • | ·· [. | | * |
| TRANS. OFT. 9 | जा इ.उ | - | | | j |
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