NEW M ICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE
FIGURES OFFICE OCC
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.

					Abilene, Texas	July 26, 1960
WE AR	E HERI	EBY RE	QUESTI	NG AN ALLOWABLE I	FOR A WELL KNOWN AS:	
Ta		No. and man		an dinangan an an 1880 ng aliku angan an dinangan an	, Well No, i	n
Jame	Compan	ARLAN	thor Del	nius - Federal (Lea	se)	44 83
	Letter	, Sec	·39····	, T178, R33E	, NMPM.,Corbin Abo	Reef Pool
	Liea	diase la		Elevation	June 1, 1960 Date Drilling	PBID JULY 15, 1960
	lease in	uicate 10	auon.	Top Oil/Gas Pay	Name of Prod. Form.	6760
D	C	В	A	PRODUCING INTERVAL -		ADO Reel
		1				
E	F	G	H	Perforations 8734	- 8764 Depth	Depth
_	_			Open Hole	Depth Casing Shoe 9026	Tubing 8984
		↓ <u></u> _		OIL WELL TEST -		
L	K	J	I	Natural Prod. Test:	bbls.oil,bbls water	Choke in hrs, min Size
			[·]		ture Treatment (after recovery of vo.	
M	N	0	P		bbls.oil,bbls water in	Choke
						24-0-22/6
	<u></u>		<u> </u>	GAS WELL TEST -		
				_ Natural Prod. Test:	MCF/Day; Hours flowed	Choke Size
tubing	,Casing	and Cemen	ting Recor	rd Method of Testing (pito	t, back pressure, etc.):	
Size	r	Feet	Sax	Test After Acid or Frac	ture Treatment:	MCF/Day; Hours flowed
				1	hod of Testing:	
133	/a 3	10	350	_		
				Acid or Fracture Treatm	ent (Give amounts of materials used,	such as acid, water, oil, and
8 5	/8 47	54	950	sand):	Mud Acid a. Abuu Gals	13% N. E.
Ì		. 1			oil run to tanks	
41	/3 90	16	275	1		4, 1960
	40 00			Oil Transporter		
- 6 6	/ 5 ' 5 '	-		Gas Transporter		
Remark	3:					
• • • • • • • • • • • • • • • • • • • •			*************			111 0 3 4
•••••••			••••••			207 R A 1960
I h	ereby co	ertify tha	t the info	ormation given above is t	rue and complete to the best of my l	moniede.
Approve	ed			, 19	- James P. Dunigan	r Operator)
			J.			
	OK C	ONSER	VATION	COMMISSION	By (Sign	ature)
	fir.		1/2	a law III	(4.8)	
Ву: Д		1.6	MI	JULINE THE	Title Superintendention	ns regarding well to:
Tiala			1		Scho Communication	
Title				THE PARTY OF THE P	NameJames P. Duni	gan
					Address810 Citizens N	at'i Bank Bidg.