## NEW\_MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

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) Martin 1760, 1975
E ARE I	HEREBY R	EQUESTI	ING AN ALLOWABLE FOR A WELL KNOWN AS:
ter Fe	rendation.	Product	tion Co. E. M. Elliott Well No. 3 in NE 1/4 NW
(Co	ompany or Op	erator)	(Lease)
Unit L	Sec	22	T 22-3 , R 37-E , NMPM, Tubb Ges Fool (11)
Lea			County. Date Spudded 11-23-1947 Date Drilling Completed 2-15-194
	se indicate		Elevation 3386 Total Depth 8110 PBTD 6706
		<del></del>	Top Oil/Gas Pay 5964 Name of Prod. Form. Tubb
D	C B	A	PRODUCING INTERVAL -
			Perforations 5964 to 6142
E :	F G	H	Depth Depth Casing Shoe 6706 Tubing
	ļ		OIL WELL TEST -
L K	K J	I	100
			Natural Prod. Test:bbls.oil,bbls water inhrs,min. 9
м 1	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume Choke
*	"   "	1 1	load oil used): 99.36 bbls,oil, 0 bbls water in 24 hrs, 0 min. Size
			GAS WELL TEST -
			Natural Prod. Test: MCF/Day; Hours flowed Choke Size
hing Ca	sing and Cem	enting Recor	
Size	Feet	Sax	
	7		Test After Acid of Fracture Treatment: MCF/Day; Hours flowed
3-3/8"	266	270	Choke SizeMethod of Testing:
			Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil,
9-5/2	2758	1500	sand): 3000 gallons regular 15% acid.
_		****	Casing Tubing Date first new Press Press Description oil run to tanks
<u>7"                                    </u>	8052	1100	<del></del>
			Oil Transporter Shell Pipe Line Corporation
		-	Gas Transporter
			wered by our application of February 21st, 1958 for dual complement of Jas Pool on which dual completion number has not been re-
Tubb (	THE LOOK	THE CALLED	did normali was 4 mili was aka mwaka wata 1 maka
e rec			ich time an amended or supplementary application will be filed
Log	100	4. 49. 94.	The state of the s
or les	y serily i	at the inic	formation given above is true and complete to the best of my knowledge.
or here	by certify to	at the inic	formation given above is true and complete to the best of my knowledge.
or nere	by certify to	at the inic	normation given above is true and complete to the best of my knowledge.
•	ey certify to	a the into	N COMMISSION  By:     Company or Operator
•	ey certify to	a the into	tormation given above is true and complete to the best of my knowledge.  19 CARTER F. UNDATUN PRODUCTI N. C. MF ANY
•	ey certify to	a the into	N COMMISSION  By: (Signature)
-	ey certify to	a the into	N COMMISSION  By:  Title Field anager
-	ey certify to	a the into	N COMMISSION  By: (Signature)