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

REQUEST FOR (GAS) ALLOWABLE

New Well / RF44444V6664

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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

					Albuquarqua, (Place)	New Mexico	Apı	(Date)
E ARE H	IEREBY RI	EQUESTI	NG AN ALLOW	ABLE FO	R A WELL KN	OWN AS:		
rthwest	Product	ion Corp	oration	(Lesse)	Well No	11-15	in SW	1/4 1/4
6	inpany or Opti	15	T 26H	R 3W	, NMPM.,	Blanco MV		D
Unit Le	iter		.,,	14,	, 14444 444.,	***************************************		······································
Rio Art	tiba				-13-57			
Pleas	se indicate lo	ocation:			Total			
D	C B	TA	Top Oil/Gas Pay	5840	Name	of Prod. Form.	Mosaver	le
			PRODUCING INTER	VAL -				
	_ _		Perforations	5840-59	99			
E	FG	H	Open Hole		Depth Casin	g Shoe 5993. 3	9 Depth Tubing	5938.74
	•		OIL WELL TEST -					
L	J	I						Chol
					bbls.oil,			
M N	N O	P			re Treatment (afte	•		Choke
•			load oil used)		obls,oil,	bbls water in	hrs,	min. Size
			GAS WELL TEST -	-				
•			. Natural Prod. 1	[est:	MCF/D	av: Hours flowed	d Chok	e Size
Mna Coo	ing and Come	nting Recor						
Size	Feet	Sax			back pressure, et			
	1		1		re Treatment:			s flowed
10-3/4	163.00	200	Choke Size	./ Method	d of Testing:	BACK	Lesente	
			Acid or Fractur	e Treatment	: (Gi ve amounts of	materials used,	such as acid	, water, oil, ar
7-5/8	3976.44	200	sand): 5840-5	996 w/35	,000 gals cr	ude, 22,000	# sd. 30	sale free f
5-1/2	2125.32	215		7 1 1			- A - A - A - A - A - A - A - A - A - A	
2-3/8	ļ						1000	
1-1/4	1 7 7 7 7 1						JULI	
			→ Gas Transporter	MALEN	n on pipe li	36	8994	1929
marks:		• • • • • • • • • • • • • • • • • • • •		••-••			A Metra	N COM
					**************************	• • • • • • • • • • • • • • • • • • • •		53.3
			***************************************		······		266	
I hereb	y certify the	at the info	rmation given ab	ove is true	and complete to	the best of my	knowledge.	ar taring the state of the stat
proved	<u>ر</u> 	198 / 198	. C.	, 19		met Product	ion Corpo	ration
-					RAY PH	IILLIPS Company	or Operator)	
OIL CONSERVATION COMMISSION					By: Ray 12	illips (Sign	••••••	
y: firegram langer haveny C. Arnold					·	(Sign	ature)	
	្សាស្រី	graf Arten	ay J. Ainc i	<u> </u>	Title	Pred Opr		
tle garvësor Dest #3					Send	Communication	ons regarding	well to:
					Name Lay I	hillipa		·····
					Address. 320.	Simme Bldg,	Albuquer	que, H.K.

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