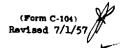
NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico



SP

REQUEST FOR (OIL) - (CLAS) 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)	Ele	emileld,	New Mexico
E ARE HI	EREBY RE	QUESTIN	IG AN ALL	OWABLE FO	R A WELL KNO	OWN AS:		
	etreleum pany or Oper		tion	Ka-Da-J (Lease)	Well No	2 , i	n NE	1/4 SW 1/
			T.25	R 12W	, NMPM., 9	sti Lover (allup	Po
Unit Lette								
			County. D	ate Spudded	5-19-58	Date Drilling	Completed	0-2-5 8
Please	indicate lo	cation:			Total I			
D C	В	A	Top Oil/	Pay 4/77	Name o	f Prod. Form.	MAL GET	149
			PRODUCING I	NTERVAL -				
			Perforation	s 47551-471	31. 48141-481	91, 48241 -	48361,	49001 - 4932
e f	' G	H	Open Hole	None	Depth Casing	Shoe 49601	Depth Tubina	49321
						· 		
L K	J	I	OIL WELL TE					Chok
	#2].	Natural Pro	d. Test:	bbls.oil,	bbls water	inhrs	,min- Siże
			Test After	Acid or Fractu	re Treatment (after	recovery of vol	ume of oil e	qual to volume o
M	0	P	load oil us	ed): 166	bbls,oil,	bbls water in _	24 hrs, _	min. Size 14
- 1			GAS WELL TE	<u>st</u> =				
	25-N. R.	72.36			me /n		Ch - I	- 0'
• •	•				MCF/Day			
Sire	ng and Cemen Feet				back pressure, etc.			
3120		-	Test After	Acid or Fractu	re Treatment:	N	CF/Day; Hour	s flowed
-5/8"	3051	250	Choke Size	Metho	d of Testing:			
					: (Give amounts of m	atorials used.	such as acid	. water, oil, and
-1/2"	4960*	400						,,,
			—	70 1.2	Date first r	· X		
					oil run to t		-	
- 1			Gil Transpo	rter Toronte	P.L. for Acec	mat of El		
			Gas Transpo	rter			ACC!	11/12/
marks:W	all compl	eted on	pump				/KLU	T1
					***************		L	
							JUL3	9 1958
T hanaba		4 4h- :-f		s above is two	e and complete to t	he hest of my k	/ourco	N. COM.
т петебу	certify that	t me moi	III S A 10	SE 10	AMERADA PE	troleum co	PORATRI	ST. 3 🖊 👚
proved				958., 19		(Company of		
			~~~ ~ ~~~	<b>~</b>	1 1 7	Fun	Kl	
OIL	CONSER	VATION	COMMISSI	ON	Ву:/4	(Signa	ture)	
Origin	nal Sione	d Emer	y C. Arno	.id	mu.	OREMAN		
						Communication	s regarding	well to:
Title Supervisor Dist. # 3								
					NameAmarad	a Petrolem	L.Corpora	<b>E108</b>
					Address Box B	- Bloomfie	1d. New.	Mexico

	 .*	•	OIL CONSERV	ATION		
1.1.1	14	<b>.</b> .	OIL CONSERVATION COMM  AZTEC DISTRICT OFFICE  No. Copies Received  DISTRIBUTION			
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