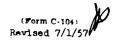
## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico



## REQUEST FOR (OIL) - ( ALLOWABLE

New Well

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.

					Farmington, (Place)	New Mexi	Loo A	ugust 28, 195 (Date)
Skelly	Oil Com	pany			A WELL KNO		, in <b>NE</b>	.1/4
K	mpany or Op Sec.	erator) 8	, T 31N	R. 14W	, NMPM., <b>V</b>	erde-Gall	lup-list.	Pool
San Ju	an An		County. Date	Spudded	uly 25, 1958	Date Drilli	ing Completed	August 15, 19
Pleas	e indicate l	ocation:			Name of			
D	C B	A	PRODUCING INTE	RVAL -				
E	F G	Н			slotted wit  Depth Casing		D . A L	
L	K J	I	OIL WELL TEST		_bbls.oil,	bbls wat	er inhrs	Choke
	N O	P	Test After Aci	d or Fracture	Treatment (after	recovery of	volume of oil e	
5 6	23 N 34 W		GAS WELL TEST	- 164				
	31N-14W				MCF/Day			e Size
tubing "Cas OD Size	ing and Geme Feet	enting Recor		* *	ack pressure, etc.	***************************************		- Claved
.0-3/4"	128	175	1		Treatment:of Testing:		<del>-</del>	
7H	2373	250	Acid or Fractu	re Treatment (	Give amounts of ma	aterials used	d, such as acid	, water, oil, and
	1		sand): 30,	000# sand	and 30,000 g	als. cru	de oil	
5"	254	2578			Date first no oil run to t		ust 23, 195	8
2" EUE	2578		Gas Transporte	e <b>r</b>	Natural Gas	Products	Company	
emarks:		ila Kudu e Lingu kuncukuncuku S	en grafin de la companya de la compa	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				2.9.1958
		·		6 - 125 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 - 126 -		•••••		N. COM.
	oy certify th	nat the info	rmation given a	bove is true (	and complete to the Skelly (	)11 Compa	ny	ST. 3
pp.ovo <b>c</b>					10:	(Company	y or Operator)  E. Cosper	
			COMMISSION		By: (a)		gnature)	
Or	iginal Sig	gned Em	ery C. Arno	id .	Title Distric	et Superi	ntendent	
Supervisor Dist. #3				•••••••	Send (	Communicat LY OIL CO	tions regarding	well to:
itle					Name Box		NETT WITH	
					AddressFarm		lew Mexico	

OIL CONSERVATION COMMISSION							
AZTEC DISTRICT OFFICE							
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