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

into the	stock tanks	. Vas mus	it be reported t	on 15.025 paia	Farmington	, New Mexico	Apr	11 18,	1958
				•	(Place)		•••••••••	(Date)	
El Pas	o Natural	Ges Co	mpany	Cundiff	R A WELL KNO	2-A in	SE	NR 4	1/4,
(Con	npany or Oper	rator) 17	T 32N	(Lease) R. 12W	, NMPM.,	Blanco			Pool
Unit Lett	m Juan	******************			2- <b>2</b> 5-58	D-4- D-4134 (1		15-58	
			County. Da	ite Spudded 6098	<b>2-25-58</b>	epth 3900	PBI D	385	51
Please		<del></del>	Top Oil/Gas	Pay 3552'(	Name of	Prod. Form.	bsa Verde	)	
D	B	A	PRODUCING II	MTERVAL - 355	<b>2-3564;</b> 358 <b>0-</b> ; 4-3710; 3746-;	3600; 3618-36 3762.	650; 3664	-3676;	
E 1	P G	H	Open Hole	None	4-3710; 3746- Depth Casing	Shoe 3897'	Depth Tubina	38181	
		X	OIL WELL TE				<u> </u>		
L	K J	I		_	bbls.oil,	bbls water in	hrs,		Choke Size
M 1	N 0	P	Test After	Acid or Fractur	e Treatment (after	recovery of volum	e of oil equ	al to volu Chok	ime of
			GAS WELL TE		bistoii,	DDIS Water In			
1714	N, 956'E	<u></u> _		=	MCF/Day	: Hours flowed	Choke	Size	
bing Cas	ing and Cemer	nting Reco	rd Method of T	esting (pitot,	back pressure, etc.	):			
Size	_	Sax	Test After	Acid or Fractur	e Treatment:	2549 MCF	/Day; Hours	flowed	3
0 3/4"	1621	150	Choke Size_	3/4" Method	of Testing:C8	lculated A.C	).F.		······
7 5/8"	34901	300	67	,200 gal. v	(Give amounts of mater and 70,0	00# sand.		water, oil	, and
5 <b>1/2</b> "	4561	150	Casing 9	88 Tubing Press	963 Date first no oil run to to	ew anks	(FPI	THE	
<b>5</b> "	3818	***	Oil Transpo Gas Transpo	KI Pal	o Natural Gal	Company	KLU	HYED	<u> </u>
marks:							APR 2	<b>1</b> 1958	
••••••		·····	•••••			******************************			
			••••••					6T. 3	<i>ý</i>
I hereb	y certify tha	at the inf	ormation giver	above is true	and complete to t	ne best of my kno Natural Gas	Company		******
	APR 2 1 19		•••••••	,	By: Origit	(Company or Call Signed D.	Operator) C. Johns!	O <b>17</b>	
Original Signed Emery C. Arnold					(Signature)  Petroleum Engineer				
_				•••••••	Title	Communications		vell to:	
itle	Superviso	or Dist. #	£ 3.			E. S. Oberly			
					NameBox	997, Fermi	ngton. Ne	ev Mexic	20
					Address				

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	Transfer to
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