DISTRIBUTION						
BANTA FF						
FILE						
Ų. S. G. S.						
LAND OFFICE						
TRANSPORTER	OIL					
TRANSPORTER	GAS					
PRORATION OFFIC	CE					
OPERATOR						

N W MEXICO OIL CONSERVATION (Form C-104) Santa Fe, New Mexico

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Off or GD 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 delivand into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

					(Place)	August 21, 1963 (Date)
			\	NO AN ATTOWART	E FOR A WELL KNOWN AS:	()
ARE	HERE	BY REC	JUEST II	NG AN ALLOWADLI	Minerals Well No	in
-		· · · · · · · · · ·	(acc)	(1		
J		., Sec		., T, R	3.8, NMPM.,	Pool
					ded 6-tie63 Date Drill	
				Elevation	Total Depth	6 PBTD 9383
Plea	ase indi	icate loc	ation:	Top Oil/Gas Pay	Name of Prod. Form.	Aba
D	C	В	A			
				PRODUCING INTERVAL -		
╤╼╋			H	Perforations	Denth	Depth
E	F	G	п	Open Hole	Casing Shoe	Tubing
				OIL WELL TEST -		Choke
L	K	J	I	Natural Prod. Test:	bbls.oil,bbls wat	ter inhrs,min. Size_
		x			Fracture Treatment (after recovery of	
M	N	0	P		bbls.oil,bbls water	
ri		Ŭ	~	load oil used):		
				GAS WELL TEST -		
					MCF/Day; Hours flo	
ubing .C	(FOOTA asing a	nd Cemen	ting Reco		pitot, back pressure, etc.):	
Size		Feet	Sax	Test After Acid or I	Fracture Treatment:	MCF/Day; Hours flowed
					_Method of Testing:	
13-3	/2_3	55				and the second
				Acid or Fracture Tre	eatment (Give amounts of materials us	ed, such as actu, water, orr, dim
5	/¥ 3		500			
	1		300	Casing iu Press. Pri	bing Date first new ess. 350oil run to tanks0	gust 19, 1963
	3 72	46			Mislood Corporation	
9_1	3/8 2/			1		
	-					
emarks	:	••••••				•••••••••••••••••••••••••••••••••••••••
••	••••••					
					is the and complete to the best of a	my knowledge.
I he	reby ce	rtify that	at the inf	formation given above	is true and complete to the best of a	. Sas Froducing Co.
pprove	d	•••••		, 19	(Compa	iny or Operator)
						Bachan
	OIL C	ONSER	VATIO	N COMMISSION	Dy:	Signature)
/	/1/	1Λ			TitleProdue	tion Superintendent
						cations regarding well to:
y:			••••••		Send Communic	ations regulation