NEV. MEXICO OIL CONSERVATION COM....SSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well 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.

				•	Midland,	Texas	January	1963
					(Place		•••••••••••••••••••••••••••••••••••••••	(Date)
WE AR	E HER	EBY RE	QUESTIN	NG AN ALLOWABLE				
	'H LOW			Moots-Fee	, Well	l No	, in	!⁄4
L	(Compa	ny or Opei , Sec	ator) 31	, T. 15-8 , R. 2	ие) 7-Е , NMPN	(.,	Ldcat	Pool
	aves			County Data Snudda	, 11-10-62	Date Dr	illing Completed	12-31-62
P	lease in	dicate lo	ation:	County. Date Spudder Elevation	31	Total Depth	8853 _{PB}	TD
D	C	В		Top Oil/Gas Pay		Name of Prod. Fo	rm. Perm.	
	• •			PRODUCING INTERVAL -	7600			•
E	F	G	H	Perforations 768	0-090	Depth	2852 Dept	7662
.—				Open Hole		Casing Shoe	Tubi	ng
L	ĸ	J	T	OIL WELL TEST -				Choke
X				Natural Prod. Test:		۰.		
M	N	0	P	Test After Acid or Frac				Choke
				GAS WELL TEST -			······································	
660	Tu	1	180/1	Natural Prod. Test:	None	MCF/Dav: Hours f	lowed Ch	oke Size
Tubing	Casing		ting Recor					
Sire		Feet	Sax	Test After Acid or Frac	cture Treatment:	3425	MCF/Day; Ho	urs flowed 24
8 5	/8	1421	1500	Choke Size 1/2" Met	thod of Testing:	Multipoint	back pressu	ire test
5 :	L/2	8171	600	Acid or Fracture Treatm	ent (Give amoun	ts of materials with the table of table o	used, such as aci	id, water, oil, and
2		7662	<u> </u>	sand): Casing Tubing Press. Press.				·
				Press. Press. Oil Transporter Sout	oil r	un to tanks	*	<u> </u>
						day convert		
}		Contra	ct being	Gas Transporter				
Kemark	5:				•••••••••••••••••••••••••			
	• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • • • • • • • • • • • • • •					
Ιh	ereby c	ertify tha	t the info	rmation given above is t	rue and comple	ete to the best of	my knowledge.	ì
Approve		JAP	-1-6-19	63, 19		Comp	any or Operator)	
		ONSER	VATION	COMMISSION	Bv:	-,22 -7	27211	· · · · ·
	m.		4		_ ,	lgent	(Signature)	A
By:	<u>///L</u>	[/34	1stro	NG	Title	-	cations regardin	g well to:
litle	itle					RALPH LOWE		
				•	Name	D 920 M		
					Address	Box 832, M	Torrenti 16X	

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HEW MEXICO OIL CONSERVATION SANTA FE, NEW MEXIC	
[File the original and 4 copies with the appro	opriate distrik: office) 'VED
CERTIFICATE OF COMPLIANCE AND TO TRANSPORT OIL AND NATU Company or Operator RALPH LONE	AUTHORIZATION 16 1983 IRAL GAS D. C. C. C. Lease ARISSIN FELCE
Well No. 1 Unit Letter L S 31 T 15-8R 2	
County Chaves Kind of Lease (State, 1	Fed. or Patented) Patented
If well produces oil or condensate, give location of tax	nks:Unit S T R
Authorized Transporter of Oil or Condensate	
Address	
(Give address to which approved copy of t	his form is to be sent)
Authorized Transporter of Gas Southern Union Gas	
Address Dallas, Texas	Date Connected
Give address to which approved copy of t If Gas is not being sold, give reasons and also explain Well not connected as yet. Well Shut In. Contract	n its present disposition:
Southern Union Gas Co.	
Reasons for Filing:(Please check proper box) New	Well (X)
Change in Transporter of (Check One): Oil () Dry G	
Change in Ownership() Other	
Remarks:	Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

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Executed this the 14 day of January	19 63
	By 621 221600.201
ApprovedI9	Title Agent
OIL CONSERVATION COMMISSION	Company RALPH LOWE
By ML Armstrong	Address Box 832
Title OIL AND GAS INSPECTOR	Midland, Texas

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