RECEIVED

NEW EXICO OIL CONSERVATION COMM... SION
Santa Fe, New Mexico

APR 8

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

D. C. Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Off 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

VE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: INTERPRETATIVELY Empire Joint Assount Magradewell No. 13 in SE 1/4 (Account Value of Company of Operator) Performance of Company of Operator) Edity Sec. 35 T. 17-8 R. 27-R NMPM, Undersignated Pool Edity County Date Syndded 3-9-60 Total Depth 5840 Form 5809 Please indicate location: Top 01/362 Pay 5750 Name of Prod. Form. About Depth 5840 Form 5809 Top 01/362 Pay 5750 Name of Prod. Form. About Depth 5840 Form 5809 L K J I Neutral Prod. Test Doils, 611, Depth 5840 Toking 5730! CIL WELL TEST Neutral Prod. Test Doils, 611, Depth 5840 Toking 5730! Neutral Prod. Test Doils, 611, Depth 5840 Toking 5730! CIL WELL TEST Neutral Prod. Test Doils, 611, Depth 38 Pays 10 Prod. Size Doils and Choke Size Neutral Prod. Test Doils, 611, Depth 38 Pays 10 Prod. Size Doils and Choke Size Neutral Prod. Test Neutral Neutral Prod. Test Neutral Prod. Test Neutral Prod. Test Neutral Neutral Prod. Test Neutral Neutral Prod. Test Neutral Neutral Prod. Test Neutral Neutral Neutral Prod. Test Neutral					Artemia (Place		Ki <u>co</u>	April	8, 1960 (Date)
(Company or Operator) P. V. Sec. 35. T. 17-8 R. 27-R. NMPM, External Depth Section S	WE ARE H	EREBY R	EQUESTI	NG AN ALLOWABLE I	FOR A WELI	L KNOWN A	s:		, ,
Please indicate location: D C B A Production 3653*DF Total Depth 5840 PBTD 5809 Top 011/0se Pay 5750 Name of Prod. Form. Abo PRODUCTING INTERVAL Perforations 5750*5750*5757*15765*5778*15786*5792*15799*5804* Copen Hole None Casing Shoe 5840 Tubing 5730* L K J I Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 75 bbls.oil, 0 bbls water in 3 hrs, 0 min. Size 6/64 Size Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing: Method of Testing (pitot, back pressure, etc.): Size Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing: Size Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing: Size Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing: Size Method of Testing: Size Method of Testing: Control of Testing (pitot, back pressure, etc.): Size Method of Testing: Size Method of Testing: Control of Testing: Control of Testing (pitot, back pressure, etc.): Size Method of Testing: Control of Test	arper-S	ivley I	impire	Joint Account Ma	grade,rwel	I No13	, in	SE /	SE
Please indicate location: D	P 14		35.	., т 17-8 , к. 27-	 , NMPN	a.,(Indesign	ated	Pool
Please indicate location: D C B A PRODUCING INTERVAL PROJUCING INTERVAL Open Hole	-			County. Date Spudded	3-9-60	Date	Drilling Com	pleted	3-28-60
PRODUCING INTERVAL— Perforations 57501 = 57571 257651 = 5778 1 257861 = 57921 257991 = 5804 Depth									
E F G H Perforations 57501-57571:57651-57781:57781:57791-5804 Depth Depth Depth Depth Tubing 57301 L K J I Natural Prod. Test: bbls.oil, bbls water in brs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of closes 6/64 Acid or Fracture Treatment (by the amounts of materials used, such as acid, water, oil, and casing 5730 1	<u> </u>	В		Top Oil/Gas Pay	5750	Name of Prod.	Form. Al	XO	
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Choke 6/64 Choke 5/12 Cho	. " '	<u> </u>		Natural Prod. Test:	bbls.oil,	bb1	s water in _	hrs,_	
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Size Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed MCF/Day; Hours flowed	37.5			GAS WELL TEST -					
Sire Feet Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed 8-5/8** 1067 400 Choke Size Method of Testing: 5-1/2** 5840 800 Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 10,000 gals, 15% MR Fa w/Hyflo and 80 rubber balls. Casing Tobing Date first new Press. Pher. Press. 200 oil run to tanks April 7, 1960 Oil Transporter Service Pipe Line Company Gas Transporter None I hereby certify that the information given above is true and complete to the best of my knowledge. APR 8 1960 , 19 Carper Drilling Company. Inc. OIL CONSERVATION COMMISSION By: (Company or Operator) (Signature) Title Vice President Send Communications regarding well to: Name Carper Sivley Empire Joint Account						MCF/Day; Hours	flowed	Choke S	Size
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sand): 10,000 gals, 156 MR Pa w/Hyflo and 80 rubber balls. Casing Press. Per Press. 200 oil run to tanks April 7, 1960 Oil Transporter Service Pipe Line Company Gas Transporter Mone I hereby certify that the information given above is true and complete to the best of my knowledge. APR 8 1960 , 19 Garper Drilling Company. Inc. (Company or Operator) OIL CONSERVATION COMMISSION By: (Signature) Title Vice President Send Communications regarding well to: Name Carper Sivley Empire Joint Account	8-5/8"	1067	400	Choke Size Met	hod of Testing			 	
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