MEXICO OIL CONSERVATION CC **4ISSION**

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

The form shall be suggested 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 deliver d into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Artesia, New Mo (Place)	exico	_
WF ARF I	HERERY 1	REQUESTI	NG AN ALLOWABLE FO	` ,	AS:	(Date)
			Federal			1/4 NE 1/4
(Co	ompany or C	Operator)	(Lease)	1	•
Umit 1⊿	, Se µtor	<u></u>	, T. 178 , R. 26E	, NMPM., Va	dogriff Keyes	Pool
*****		ेव्य	County. Date Spudded.			
Plea	se indicate	location:	Elevation			
D	C B	A	Top Oil/Gas Pay 144	Name of Prod	. Form. <u>Oueen Gr</u>	ayourg
			PRODUCING INTERVAL -			
E	F G	H	Perforations 1442	2-14431 - 1474-1479 Depth	3' - 1782-1786' Depth	<u>- 1)73-1983 </u>
			Open Hole	Casing Shoe_	Tubing	
L	K J	I	OIL WELL TEST -			Choke
			Natural Prod. Test:	bbls.oil,b	bls water inhrs	min. Size
M	N O	P		re Treatment (after recov		Chaka
"	°		load oil used):	bbls,oil, 0 bbls	water in <u>Z4</u> hrs, <u> </u>	min. Size
1670		7.7.	GAS WELL TEST -			
	N - 15			200 MCF/Day; Hou	rs flowedChoke	e Size
Tubing ,Ca: Size	sing and Ge Feet	menting Reco	· · · ·	back pressure, etc.):		
		1	1	re Treatment: 3.476		
4 1/2	3017	337	Choke Size Metho	od of Testing:		
ŀ		8% Gel.	Acid or Fracture Treatmen	t (Give amounts of materi	als used, such as acid,	water, oil, and
			sand): 500 gal. 15%	Acid. 60.000 gal	waterfrac, 60,	000# 20=40_s and
2 3/8	1750	0		Date first new oil run to tanks		963
			Oil Transporter	IcWood Corporation		
<u></u>	<u> </u>		Gas TransporterF	hillips Petroleum	Company	
Remarks:		owable-e	ransed for 90 da	ya only 7001 2	my stinger	- /-/- 3
-1.1.tilice	4 -1 hi	- ray	my Formal was the	seaso) con con	y puchana	<u></u>
		· · · · · · · · · · · · · · · · · · ·		•••		
I here	by certify.	that the inte	ormation given above is tru	Kersev &	onohue	
Approved	A	:# 419 (33 , 19	, /	Company or Operator)	
o	IL CONS	ERVATION	COMMISSION	By: Harre	ed Kusey	· · · · · · · · · · · · · · · · · · ·
7,		/		•	(Signature)	
By:		,	<u>//</u>	TitleSand Com	nunications regarding	well to:
Title	971 AND (eas inspect	or .			
					y&Company	
				Address P. O. Bo	x 316, Artesia,	New Mexico

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