## (Form C-104) Ravised 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.

			(Place) (Date)
Kine:	eid & Wa ompany or Op	atigon	ING AN ALLOWABLE FOR A WELL KNOWN AS:  Aztec Faderal , Well No. 2 , in NW 1/4 NE (Lease)
B Unit L	Sec	15	T 175 , R 28E , NMPM , Red Lake Po
E	ddy		County. Date Spudded 4-9-59 Date Drilling Completed 4-30-59
	se indicate l		Elevation 3545 Total Depth 2052 PBTD
			Top Oil/Gas Pay 2925 Name of Prod. Form. Premier
D	C B	A	PRODUCING INTERVAL -
E	F G	H	Perforations None
		_ n	Open Hole 2025-2052 Depth Casing Shoe 2025 Tubing 1965
L	KJ	ı	OIL WELL TEST - Balling Choi
		1.	Natural Prod. Test: 3 bbls.oil, -0- bbls water in 24 hrs, min. Size
М	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 60 bbls,oil,bbls water in 24 hrs,min. Size 1
	V- 23/0		GAS WELL TEST -  Natural Prod. Test: TSTM MCF/Day; Hours flowed Choke Size
8 5/5 5 1/5		50 100	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 25.000 gal. oil & 50.000 lbs. sand  Casing Tubing Date first new press. 1500 Press. 300 oil run to tanks 5-8-59
			Oil Transporter Malco Refineries. Inc.
Remarks:			Gas Transporter None
	_		formation given above is true and complete to the best of my knowledge.  Kincaid & Watson  (Company or Operator)
Ol	IL CONSER	RVATION	N COMMISSION  By: (Company of Operator)  (Signature)
By:	U. a.	Gre.	Title Send Communications regarding well to:
Title	*************	***************************************	Name Kincaid & Watson
			Box 536, Artesia, New Mexic
			Address

## NEW M. .ICO OIL CONSERVATION COL ISSION SANTA FE, NEW MEXICO

Form C-110 Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Kinosid & Wat	son	Lease Aztec Federal
Well No. 2 Unit Letter B S 15 T		
County Kind of Lease	(State, Fed. or	Patented) Federal
If well produces oil or condensate, give locat	ion of tanks:Uni	it 6 S 15 T 178 R 28E
Authorized Transporter of Oil or Condensate		
Address Box 125, Artesia, New Mexi (Give address to which approved	<u>co</u>	
(Give address to which approved	copy of this for	m is to be sent)
Authorized Transporter of Gas None		
Address		
Address (Give address to which approved If Gas is not being sold, give reasons and als	copy of this for so explain its pr	m is to be sent) esent disposition:
Not enough Gas for commercial or	oduction	
		•
Reasons for Filing:(Please check proper box	New Well	Nov. No.77 (Y)
Change in Transporter of (Check One): Oil (	) Devr Coo . '	Chead ( ) Condensate ( )
Change in Transporter of (Check One): Off (	) Dry das ( )	Chead ( ) Condendate ( )
Change in Ownership ( )	Other	( )
Change in Ownership() Remarks:	١Gi	ve explanation below)
Tema ino.		
The undersigned certifies that the Rules and	Regulations of	the Oil Conservation Com-
mission have been complied with.		
English the 9 day of Maw	19 59	
Executed this the 8 day of May	-17 <u>-37</u>	1 1/1
	By //	With Tuen
		<del>×/+</del> /-
Approved19	Title	Agent
OIL CONSERVATION COMMISSION	Company	Kinceid & Watson
	<u>-</u>	
By W.a. Gressett	Address	Box 536
Title - Production of the Control of		Artesia, New Mexico