EXICO OIL CONSERVATION COMA SION SION For Store Provided (Form Corder) Santa Fe, New Mexico REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

NEW

						ls, new me	XI CO	July	8, 1959
	E UE	DEBV D	FOUESTIN	NG AN ALLOWAI	,	ace)	4.6		(Date)
				TEXAS Br				NW 1/	SM .
	(Comp	bany or U	perator)		(Lease)				
L	i Lotter	, Se	c 13	, T. 16-S , R	29-E , NMI	PM., Un	designate	d <u>Ann 1</u>	
	Eddy			County. Date Sp	udded 6-3- 59	Dat	Drilling G	mpleted	6-27-59
			location:	Elevation	37271	Total Depth	2134	PBTD	
D	C	B		Top Oil/Gas Pay	21.08*	Name of Prod	. Form. Pe	nrose Sar	id (Queen)
5	ľ		A	PRODUCING INTERVAL	L -				
				Perforations					
E	F	G	H	Open Hole_2108	* - 2130*	Depth _Casing Shoe	21.05*	Depth Tubing	20681
				OIL WELL TEST -	NO TEST NA	TIRAT.		* ******************************	
L	K	J	I		t:bbls.oi		bls water in	her	Choke
0					r Fracture Treatmen				
M	N	0	Р		<u>96</u> bbls,oil,				
				GAS WELL TEST -					
198	0* F	SL & 6	59.5 FWL				. .		
			enting Record		t:				
Sire	•	Feet	Sax	in the of tooting	(pitot, back press				
			Set &		r Fracture Treatmen				lowed
10 3	/4		Pulled	Choke Size	Method of Testin	g:			
85	101		Mudded & Pulled	Acid or Fracture T	reatment (Give amou	unts of materia	ls used, suc	h as acid, wa	ter, oil, and
0)	/0	4724	rautea	sand): 500 g	1. HC1, 58,7	16 gals cr	ide & 173	.000# San	d
	7"	21.05*	200	Casing T Press. 400# P	ress. 115# Date	<pre>e first new run to tanks</pre>	7-7-5	9	
-					Continental 1				
	2#	2068*		Gas Transporter	None Avail	ble			
marks				·····-			•••••		
•••••							•••••	· · · · · · · · · · · · · · · · · · ·	
	•••••	••••••							
	-	-		mation given above	-	lete to the best	t of my <mark>kn</mark> ov	vledge.	
prove	d	••••••	JUI		9 GENER	AL AMERICAN			EXAS
						RAL	ompany or Op	CTAIOT)	
		CONSEI	RVATION (COMMISSION	By: R	J. Heard	(Signature)	••••••
	11	Pr	matri	ona	Title	District S	hmaninta	ndent	
• ••••			AND GAS INS	rector	I me	Send Comm			to:
le	•••••••	******	•••••••	¥	Name	General A	erican O	il Co. of	Terras
					Address.	P. O. Boz	- 4LU, LO	W RLLLB	He Ne

Address Date Connected (Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition: Ges is flared - No market available Reasons for Filing:(Please check proper box) New Well (L) Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other () Remarks: (Give explanation below)