(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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: HELL E. SALSICH FFATHERSTORE—FEDERAL Well No. 3 in. NW HE Complete or Operator Top. 175 R. NMPM., Square Lake Please indicate location: D C B A Perforations Elevation Top. 011/Gas Pay 2537 Name of Prod. Form. Crayburg PRODUCING INTERVAL For I WELL TEST Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size OIL WELL TEST Natural Prod. Test: bbls.oil, O bbls water in hrs, min. Size I Size Feet Sax Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke Size Method of Testing: MCF/Day; Hours flowed Choke Size Method of Testing: Acid or Fracture Treatment: (Give amounts of materials used, such as acid, water, oil, and acid 26,000 gal eil and 26,000 gal eil and 26,000 gal eil and 26,000 gal eil and 26,000 gal read. Casing Press. Oil Transporter Tests Method of Testing: Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and acid 26,000 gal eil and 26,000				Hidland, Texas	4-29-58
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NEW ME O OIL CONSERVATION COM SION 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 WEIL R. SAISTCH	Lease FEATHERSTONE -FEDERAL
Well No. 3 Unit Letter B S 1 T	175 R 200 Pool Square Lake
County Eddy Kind of Lease	(State, Fed. or Patented) Federal
If well produces oil or condensate, give locate	tion of tanks: Unit C S 1 T 17S R 29E
Authorized Transporter of Oil or Condensate	Texas New Mexico Pipeline Company
Address P. O. Box 1510, Midland, Texas	
(Give address to which approved	copy of this form is to be sent)
Authorized Transporter of Gas	
Address	
(Give address to which approved	copy of this form is to be sent)
If Gas is not being sold, give reasons and als	so explain its present disposition:
Gas being vented, Not commercial	
	
Reasons for Filing:(Please check proper box	New Well ()
Change in Transporter of (Check One): Oil (
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Change in Ownership () Remarks:	(Give explanation below)
The undersigned certifies that the Rules and	Deculations of the Oil Consequentian Con-
mission have been complied with.	Regulations of the Off Conservation Com-
mission stave been complied with.	
Executed this the 20th day of April	19_58
	By Jam Ratt Allew
Mari	
Approved MAT & . R 19	Title Geologist
OIL CONSERVATION COMMISSION	Company WEIL E. SALSICH
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By ML armstrong	Address 30k Central Bldg Hidland, Te
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