NEW XICO OIL CONSERVATION COMM Santa Fe, New Mexico

1957 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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Midland, Texas	•••••••••	September 3, 1957
ARE F	EREBY RE	OUESTIN	IG AN ALLOWABLE FOR	A WELL KNOWN	AS:	
		Salsich	State A. A.			sv 1/4 NV 1/4,
Unit La	, Sec	2	, T 173 , R 29E .	•		
	RAAT		County. Date Spudded	ly 11, 1957 Dec	Drilling Co	spleted August 26, 19
	se indicate lo		Elevation	Total Depth_	50051	PBTD
D	C B	A	Top Oil/Gas Pay 2530 PRODUCING INTERVAL -	Name of Prod	. Form.	
	<u></u>		9522.1.7.	2632-361		
E .	F G	H	Open Hole	Depth Casing Shoe	26611	Depth Tubing 25-30
<u>. </u>	K J	I	OIL WELL TEST - Natural Prod. Test:	bbls_oil.	obls water in	Choke hrs. min Size
	N O	P	Test After Acid or Fracture	Treatment (after recov	very of volume	of oil equal to volume of
M	N O		load oil used): 29 bbl:	s,oil,bbls	water in <u>2</u> 1	hrs, min Size
		L				
			Natural Prod. Test:			
Size	ing and Gener Feet	TODON BRIFE SAX				
5134	1 1		Test After Acid or Fracture			
-5/8	247	300	Choke SizeMethod o	f Testing:		
4.6	2660	-	Acid or Fracture Treatment (C	Sive amounts of materi	als used, suc	h as acid, water, oil, and
-1/2	2661	200	sand): 500 callens req	ular seid. 25,0	00 gals of	11 4 25,000# Send
	1		Casing Tubing Press Press	oil run to tanks_	8	26-57
			Oil Transporter Texas	ev Nexico Pipe	Line Comp	my
	1 1		Gas Transporter			
marks:			***************************************			••••••••••••
		••••	***************************************	**********************		***************************************
		,,	************************************	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
I herel	by certify tha	at the info	rmation given above is true as	nd complete to the be	st of my know	wledge.
			957, 19	3	eil E. Se	Leich_
•		_, 0	00,	11-15	Company or O	perator)
0	IL CONSER	VATION	COMMISSION	By: feel	(Signature	<u></u>
>	190		<i>†</i>	,	One and an	· ,
	L LS	men	2074	TitleSend Com	nunications r	egarding well to:
le <i>g</i>	IL AND GAS	INSPECTOR		•• •	l E. Sals	
			1	1 4 6421 6441		
				Address 304	Central	Building, Midland, To

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