NEV 1EXICO OIL CONSERVATION COM. SION E IV E prorm C-104) Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

1962 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.

			Root Fed		1, Well No	, in		4 ST 1/
(C Oneman)			_ 176	(Leac)	w. v. a. e. e. e. e.	NMPM., Squere Lake		
Unit 1		Sec	, Т	, R	., NMPM.,	of set a	163. ¥	Ро
			County. Da	ate Spudded 9	-4-44	Date Drilling C	cmpleted	3-15-45
		e location:	Claundian		Total De			
r ic			Top Oil/Gas	Pay 2647	Name of	Frod. Form.		
)	C	B A	PRODUCING I	NTERVAL -				
1	·			s None				
	F	G H	• 1		Depth	2522	Depth	2620
ł	·		<u> </u>		Casing S	hoe	Tubing	2632
-	K	JI	OIL WELL TE	<u>si</u> - Pumpin	E			Chol
·	v	"	Natural Pro	d. Test: <u>16</u>	bbls.oil,	bbls water in	24 hrs,	min. Size
			Test After	Acid or Fracture	Γreatment (after r	ecovery of volum	ne of oil equ	ual to volume
1	N	0 P	load oil us	ed):bbl:	s.oil,b	bls water in	hrs,	min. Size
Ì	İ		GAS WELL TE					
980	PHT.	660 PVI						
					MCF/Day;			
dng ,C	_	Comenting Ru		esting (pitot, ba	ck pressure, etc.)	·		
Size	Feet	Sax	Test After	Acid or Fracture	Treatment:	MCF	Day; Hours	flowed
하	500	50	Choke Size	Method o	f Testing:			
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51	2500	100			1146 Str. 1200-13 01 1110			•
2	2632		sand): Casing	Tubino	Date first ne	w		
					oil run to ta			
			Oil Transpo	rter Texas-	New Mexico	Pipe Line	Co.	
			Gas Transpo	orter Kone				
narks			************************					
					***************************************			••••••
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T he	rehy certify	that the	nformation give	n above is true a	nd complete to th	e best of my kne	owledge.	
	Λ.	PR 5 1	962	19	Crari	ige Corpor	mation	
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	OIT. CON	SERVATION	ON COMMISSI	ON	By:	- arm	ul	
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	OIL CONSERVATION COMMISSION					
	ARTESIA DISTRICT OFFICE					
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NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

FORM C-110 (Rev. 7-60)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE Company or Operator Lease Well No. Graridge Corporation Root Federal Vilson Unit Letter Township Range 30E E447 Pool Kind of Lease (State, Fed Fee) Square Lake (LC 028785 **Federal** Unit Letter Section If well produces oil or condensate Township give location of tanks Address (give address to which approved copy of this form is to be sent) Authorized transporter of oil a or condensate Texas-New Mexico Pipe Line Co. P.C. Box 1510, Midland, Texas Is Gas Actually Connected? Yes_ _No____ Date Con-Address (give address to which approved copy of this form is to be sent) Authorized transporter of casing head gas or dry gas nected Fone If gas is not being sold, give reasons and also explain its present disposition: RECEIVED Not commercial APR 5 1962 RE. SON(S) FOR FILING (please check proper box) ARTESIA, OFFICE Change in Ownership Change in Transporter (check one) Other (explain below) Oil Dry Gas Change well status from TA Casing head gas .
Condensate . . to producer. Remarks The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the ____ day of ___ APPL OIL CONSERVATION COMMISSION Approved by Title Company Graridge Corporation OIL AND GAS INSPECTOR Address Braver B APR 5 1962 Artesia. New Mexico