EXICO OIL CONSERVATION COMP ION NEW

Santa Fe. New Mexico

(Form C-10) Revised 7/3/57 RECEIVED New Wes

REQUEST FOR (OIL) - (GAS) ALLOWABLE This form shall be submitted by the operator before an initial allowable will be assigned to any completed On 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 all

able will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this format filed curing calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is melivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. October 13, 1961 Hobbs, Her Mexico (Place) (Date) WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Sinclair til & the Company J.L. Real #A" , Well No. 10 , in # 1/4 (Lease) (Company or Operator) T Sec. 7 T 178 , R 338 , NMPM., From Date Drilling Completed County. Date Spudded...... Elevation Please indicate location: ____Name of Prod. Form. Top Oil/Gas Pay 1977 D C B PRODUCING INTERVAL -Perforations_ Ħ E G Open Hole__ Casing Shoe OIL WELL TEST -L I Natural Prod. Test: bbls.oil, bbls water in hrs, min. Sige Ï Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume load oil used): bbls, oil, bbls water in hrs, min. Size GAS WELL TEST -4401 1/3 43000° 1/0 _MCF/Day; Hours flowed _____Choke Size_ Natural Prod. Test: Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):_____ Feet Sax * Size MCF/Day; Nours flowed_ Test After Acid or Fracture Treatment:____ Method of Testing: 173 19-Y Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 7 5000 min acid sand): Date first new Tubing 2-3/0 _oil run to tanks_ Press. Press. Testa-New Maries Papaline Gas Transporter I hereby certify that the information given above is true and complete to the best of my knowledge. (Company or Operator) OIL CONSERVATION COMMISSION (Signature) Asst Bist Supt Title..... Send Communications regarding well to: Name Ball, Wood

risking: CCC; ce:HFD,JH,File

Address 520 E Broadeny, Holde, H.L.

37 12

OIL CONSERVATION COMMISSION -APTESIA DISTRICT OFFICE No. Copies Received

DISTRIBUTION \$,-p//...75£ PROVEN BUT RE

5 + 6 - 44 to 14 to 200

NUMBER OF COPIES RECEIVED								
DISTRIBUTION	- 0	→ NE	W MEXICO OIL	CONSERVAT	ION CONTISSION	l e	ORM C-110	
BANTA FE	7	✓ "	- m mLAICU UII	COMPLKANI	TOR C HOUSE		:	
TLE	7 0		SAN	TA FE, NEW M	EXICO		(Rev. 7-60)	
U.S.G.S.		ľ		-, -			1	
LAND OFFICE		CERTIFICATE OF COMPLIANCE AND AUTHORIZATIONE CEIVE						
TRANSPORTER OIL	7				MATHRAL CAC		CIVE	
GAS .		j T0	TRANSPOR	I UIL AND	NATURAL GAS		▼ 1	
PRORATION OFFICE	<u> </u>	L_				CE OCT		
OPERATOR	<i>5</i> -1	ELLE THE OP	ICINAL AND 4 C	OPIES WITH TH	E APPROPRIATE OFFI	CE OUT	7 0 100	
		TFILE THE OK	IGINAL AND 4 C	OF ILS WITH TH			Vell No.	
Company or Operator	F			į	Lease	_	Aem Mos-	
•							→	
		011 & Ges Con			J.L. Eccl "A"	ARTERIA		
Unit Letter	Section	Township	Range		County	-014	OFFICE	
•		178		311	<u> </u>	T.A.S.		
					Kind of Lease (State, Fed	Feel	9	
Pool				ì	Kind of Lease (State, Fed	reej		
Fran	ì				- Madama 9		4	
** 11	1		Unit Letter	Section	Township	Range		
	duces oil or cond							
give	location of tank	.0			178			
				Address (give ad	dress to which approved cop	y of this form	is to be seem!	
Authorized transporter	∰oson (Table or co	ondensate		l				
			_	Tenas-I	iur Nexteo Pipeli:	re dember	57 1	
Tours-But	maios liv	eline Company	7	Bex 151		-	- I	
	£	- •			#			
					Towns .			
		is Gas Act	tually Connecte					
		. [, ,	Date Con-	Address (give ad	dress to which approved cop	y of this form	is to be sent)	
Authorized transporter	of casing head	gas 🛖 or dry gas [nected	l	<u>_</u>	-	** N	
	ř.	-		Skelly	Gil Company		- 1	
Shelly 011	Same Property			Best 201			3	
			30 7 6					
	E.			- Loop Hi	ille, non nexton-		10	
If gas is not being sol	give teasons	and also explain its p	resent disposition:		3		130	
						į.		
						3	3	
	10000000000000000000000000000000000000							
	in a					4		
			1					
			,			Ŧ	4.5	
	\$							
	ž	REASON	I(S) FOR FILING	(please check p	roper box)			
	2				•	_		
	New Well			Change in Own	ership			
	Change in Tr	ransporter (check one,)	Other (explain	below)		3	
	-	= '		· -	_		1	
	Oil							
	Casing he	ead gas . 🗀 Cond	ensate	*****		_		
							9	
	•.						į	
	1 2						į	
	1						1	
	4				•		1	
	2							
	·							
Remarks						:	. 1	
							النام والا	
Wall w	nethod over	ent complete	od in the di	PER ELTER	Zone, well forme	era brog	these their	
		so, Grayburg			-			
-	Annah ma	- American					6 1	
	4							
	1							
	•						7	
	+	Dul 1 D	ione of the Oil C	Onservation Com	mission have been compl	ied with.		
The undersigned co	ertities that the	Rules and Regulat	HORS OF THE OFF		mission have been compl			
					_			
	Executed	d this the 13th	_ day of	De Labor				
				By				
n	IL CONSERVA	TION COMMISSION			()			
				⊣ <i>⁄ "</i>	X USIMON			
Approved by		3			V X COOL C			
	. ^			Title				
J.	11///	. / .						
	12 (1)11	MILLECTIC		Ass	Bist Supt	 		
Title				Company	-			
	AN 100 000	IS SERVE M			- A43 A A			
ML AND GAS ISSPECTON Sinclair Oil & Gas								
Date				Address				
				/an = =				
		JOT 1 9 1981		الله من المناز	readray, Mobbe, I	offe		
			ŧ	1	_			