Santa Fe, New Mexico REQUEST FOR (OIL) - (GAS) ALLOWABLE AR 3 New Well Recommission ted in QUADRUPLICATE and The orm shall be submitted by the operator before an initial allowable will be assigned to any completed Off or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-104 was sent. The allow-able will be assigned effective 7:00 A.M. on date of completion or recompletion able 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 delive. d into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

					Artesiag] (Place)	Artesia, New Nexico		
					LE FOR A WELL KN			
b	lation	al Dr	illing.	Co., Inc.	Leavitt, Well No.	, in		
			rator) <b>1.3</b>			Atoka-Graybur	<b>g</b> Pool	
				County. Date Spu	dded1+15-61	Date Drilling	Completed 1=28=61	
		licate lo		Elevation32	<b>98</b> Total	Depth978	PBTD	
D	C	В	A		967Name	of Prod. Form	Grayburg	
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<del>м</del> +	N	0					me of oil equal to volume of Choke	
IJ I	n			load oil used):	34	bbls water in 2	hrs,min. Size	
				GAS WELL TEST -				
	20/N	-990/	w /	. Natural Prod. Test	:MCF/I	Day; Hours flowed _	Choke Size	
ubing "C	asing a	und Cemer	ting Record	d Method of Testing	(pitot, back pressure, e	tc.):		
Size	1	Feet	Sax	Test After Acid or	Fracture Treatment:	МС	F/Day; Hours flowed	
				Choke Size	Method of Testing:		i	
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				······································		ational Drill		
					Address	0. Box 1263,	Artesia, New Merice	

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	CERTIFICA TO TH	TE OF COM	PLIANCE	AND AUTHORIZAT	office) E C E 1961 TION MAR 3 D. C. C. D. C. C. Toavitt ARTESIA C. C. C.
Company o	or Operator			- Lease	ARTES
Well No.	Unit L	etter _ S	T	R of Pool	
<u> </u>			·····		rand on the
County	Eddy	Kind of	Lease (St	ate, Fed. or Patent	<sup>ed</sup> ) <b>Pat</b> , 6 <u>13</u> T <u>18</u> R <u>26</u>
				Continental	
					-
Address	(Give address	P.O. to which app	Por 36 roved co	y of this form is to	be sent}
	l Transporter of				
Address				Date Cor	inected
	(Give alldress	to which app	roved co	Date Cor by of this form is to	be sent)
lf Gas is n	ot being sold, gi	ve reasons a	and also e	xplain its present d	isposition:
الشعيب بالماحية عبادي فيبرا بالمريب					
Reasons fo	or Filing:(Please	check prope	er box)	New Well	<b>'x</b> ) <i>b</i>
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By ML Anustring Address P.O. Box 1263, Artesia, New Hexico

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