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

	4.9	34		Adkins	11	, Well No	,	in1/4	•••••
Uni	Better	, Sec	17	, T, R	28/8	, NMPM.,	Artmia		F
				County. Date Sp	udded	Marrie Commenter of the	Date Drilling	g Completed	A
1	lease in	dicate lo	cation:	Elevation	a	lotal	Depth	PBTD	NOT .
D	C	В	A	Top Oil/Gas Pay	254,972	Name (of Prod. Form.	State And	
				PRODUCING INTERVA	-				
<u> </u>	F	G	H	Perforations	V/48//	9419 540			
	_		"	Open Hole		Casin	g Shoe	Depth Tubing	
	K	-	-	OIL WELL TEST -					
•	V	J	I	Natural Prod. Test	:	bbls.oil,	bbls water	in hrs,	Cho min. Siz
				Natural Prod. Test	Fracture 1	reatment (after	Or recovery of vol	lume of oil equal	6 to volume
1	N	0	P	load oil used):					
				GAS WELL TEST -		Ð	•	24 0	1
	780NI	d h/		Natural Prod. Test	•	MCE/D	we House Channel	Shaha at	
ing ,	Casing a	nd Cemen	ting Recor						
Size	1	Feet	Sax	Test After Acid or					
				Choke Size				ncr/Day; Hours 110	wed
10	3/4 2	401	20						
_				Acid or Fracture T	reatment (G	i ve amounts of	materials used,	such as acid, wate	r, oil, ar
•	7/4 7	100	PALLE	sand): Casing 10260			n000 and mad	Pinne nil 10	00011
-5	3 -		100	Casing Press. P	1 1.2	oil run to	tanks	LANGE OLL 40	,000
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ICO OIL CONSERVATION COL LISSION

SANTA FE, NEW MEXICO

Form C-110 Revised 7/1/55

(File the original and 4 copies with the appropriate district effice)

- CERTIFICATE OF COMPLIANCE AND AUTHORIZATION $-\frac{1100}{100}$ $\frac{120}{2}$ TO TRANSPORT OIL AND NATURAL GAS

Company or Ope	erator	Fred M	Allicon		L	ease Mik	m st	
Well No. 1	Unit	Letter 7	s 17 T	185 R 285	_Pool_	Artesia		
County	y	Kin	d of Lease	(State, Fe	d. or Pa	atented)	State	
If well produces	s oil or c	ondensate	give locat	ion of tank	s:Unit	r s 17	T 18 S	R 28E
Authorized Tra	nsporter	of Oil or	Condensate	Contine	mtal Pip	e Lime Co.	<u> </u>	
	nce City,							
(Gi	ve addre	ss to which	n approved	copy of thi	s form i	is to be s	ent)	
Authorized Tra	nsporter	of Gas	none					·
Address					· · · · · · · · · · · · · · · · · · ·	····		
			approved					
If Gas is not be	_	_	ons and als	o explain i	ts prese	ent dispos	ition:	
	vailable	market						
								
Reasons for Fil	ing:(Plea	se check j	proper box)	New V	Vell_			(X)
Change in Tran	sporter o	f (Check C	ne): Oil () Dry Gas	s () C'	head () (Condens	ate ()
Change in Owne	rship		()	Other				<u>, () </u>
Remarks:					(Give	explanatio	n below	')
The undersigned	d certifie	es that the	Rules and	Regulation	s of the	Oil Conse	rvation	Com-
mission have be	en comp	lied with.						
Executed this th		day of some		10 =				
Executed this th	152h	day of	<u> </u>	19_59	`			
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