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.

APPLITATION APPLICATION

					(No)	BAIOU Y/	***********
'E AOE I	JEDEBV B	FOURT	INC AN ALLOWAR		(Place)		(Date)
- ^Y.	S. WEI	CH	ING AN ALLOWAB BROOK	OVER	WELL KNOWN AS	: 	SR
↓C o	mpany or O	erator)		(Lease)	, Well No	, in	1/41/4,
J	Sec	4	, T, R	29E N	MPM. Loco	HILLS	Pool
Unit Id			County. Date Spu				
			County. Date Spu	idded	Date Dr	illing Completed 6	710/08
Please indicate location:			Total Depth 3299 PBTD Top Oil/Gas Pay 2504 Name of Prod. Form. Loco HILLS				
D	C B	A	İ		Name of Prod. Fo	rm.	100
			PRODUCING INTERVAL		ZT99. 9504 =	- 0500	
E	F G	H	1 . 02 . 02 @ 02 0119		3122; 2504 7		
· •		*	Open Hole		Depth Casing Shoe 32	99 Depth Tubing	<i>3295</i>
			OIL WELL TEST -			_	
L	K CJ	I	Natural Prod. Test	. I 5 bb1.	s.oil,bbls		Choke
- 1		1.			tment (after recovery		
M	N O	P			l,bbls wate		
				DD1s, 011	bbls wate	r in Thrs,	min. SizeAUA
		نسيك	GAS WELL TEST -				
	74 5 4	<u> </u>	Natural Prod. Test:	·	MCF/Day; Hours f	lowedChoke	Size
ibing ,Cas	ing and Com	enting Reco	rd Method of Testing	(pitot, back pr	ressure, etc.):		·
Size	Feet	Sax	Test After Acid or	Fracture Treat	tment:	MCF/Day; Hours	flowed
IO	40I	50	Choke Size				
			-				
5-1/2	<i>3295</i>	225			amounts of materials u	used, such as acid,	water, oil, and
			3010/1	E BELOW	Data finat now		
_			Press. 450 Pr	101 Ing 100	Date first new oil run to tanks 4	PRIL'8, I9	<i>59</i>
			Oil Transporter	Trxas Ne	W MEXICO PI	PE LINE CO	•
	1	<u> </u>	Gas Transporter				
marks:	/11/59	- San	BFRAC FROM	3102 70	3122 WITH 3	0,000# or	SAND AND
OO BA	BRELS	OF OIL	4/0/08 -	DANDERA	c with 55,0	OO# OP SAN	D AND 9II
ARREL	S OF O	IL PRO	M 2504 To 2	520.			
T hereb	w certify th	at the info	ormation given above	is true and co	omplete to the best of	my knowledge.	
			19		r. s	. WELCH	
proved		•••••••	, 13	/		any or Operator)	
Oī	I. CONSEI	RVATION	COMMISSION	Bv:	1 / 7/	rleh	
→.			-	<i>-,</i> · · ·		(Signature)	
. <i>M</i>	L (In	meer	ong	Title	OWNER		
			<i>s</i> f		Send Communic	cations regarding w	rell to:
le	•••••••	***************************************		 Nam	V. S. WE.		
					BUX 1417		
				Add.	ress ARTESIA	NRW MEXTO	0