NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

to the stock	c tanks. Gas	must be repo	orted on 15.025 psia a	Artesia, New	Mexico	November	12, 1955
				(Place)			(Date)
E ARE H	EREBY RE	EQUESTING	G AN ALLOWABLE	FOR A WELL KNO	OWN AS:		
BORGE	H. WIL	Lians	Fe	deral Well No	, ir	SW 1/4	SE 1/4,
4.0			م1)	25¢ \			
0 ~	, Sec	30	T188, R	29K , NMPM.,	MITGGEC		Pool
(Unit)	PAA:		County. Date Spudde	a 8/23/55	Date Compl	eted 9/28/	′ 55
			County. Date Spudde	· · · · · · · · · · · · · · · · · · ·	, Date Opp.		
Pleas	e indicate k	ocation:			2372	·	200
			Elevation	Total Dep	oth 2290+	, P.B	266
			-	2163' _N			
			Casing Perforation	ons: 2163-2175'	w/8 shot	s per foot	or
			Depth to Casing	shoe of Prod. String			
			-	st 20			
	0						
				20 bbls. Oil is			
			Test after a	ndfrac	20		B OPD
Casing Size	and Comenti Feet	ing Record Sax	Based on20	bbls. Oil in	24	Hrs	Mins.
	reet		Gae Well Potent	ial		,	
8-1/4	372	40					
5-1/2	2251	160		ches			
			Date first oil run	to tanks or gas to Tra	insmission system	:Novembe	r10,195
				ng Oil or Gas: Arte	mia Pipe I	ine Compan	ny
	<u></u>		Oil will	be trucked fro	OW Mell co	bibe true	e cank.
lemarks:			***************************************				

,				and complete to	the hest of my k	nowledge.	
			mation given above is		rge H. Wil	liams	
pproved			, 19		(Company o	•••••	
				B	anita A.	into	
OI	L GONSEI	RVATION (COMMISSION	By:	(Signa	ture)	
X	/a -	Jake.	nson	Title Age	nt		
y: ,, /s	.W.	The state of the s		Send	Communication	ns regarding well	l to:
itle				Nas	s Juanita		
				Name	P. O. Box	308	

Address

Artesia, New Mexico