NEI IEXICO OIL CONSERVATION COMM Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE 18 2 / 1958 New Well

Recompletion

£e.

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.

					(Place)	. Nextee			
E ARE H	EREBY RI	EQUESTI	NG AN ALLC	WABLE FOR	A WELL KN	OWN AS:			
	pany or Ope			(Lease)	, Well No	, i	in	. 1/4	
			т 178		NMPM	Greeters	Jackson	Poo	
Unit Lett									
			County. Da	te Spudded	-18-58	Date Drilling	g Completed	6-19-58	
	indicate k		Elevation	<u></u>	Total	Depth	PBTD	1.7073	
		T	Top Oil/Gas	Pay Jule	Name	of Prod. Form	Sen Andi		
DC	) B	•	PRODUCING IN	TERVAL -					
EF	r G.	H				ente).	Depth		
			Open Hole		Depth Casin	g Shoe	Tubing	3276	
		<u> </u>	OIL WELL TES	1 -					
L	C J	I	Natural Prod	. Test:	bbls.oil,	bbls water	in hrs	Choke ,min. Size	
		- 🛣						qual to volume of	
M		P						Choke	
			logo oll use	00) <b>:</b> 00	15,011,	DDIS Water in	<u> </u>		
			GAS WELL TES	<u>1</u> -					
			- Natural Prod	. Test:	MCF/D	ay; Hours flowed	Chok	e Size	
bing Casi	ng and Ceme	nting Reco	rd Method of Te	sting (pitot, b	ack pressure, et	c.):		•	
Size	Feet	Sax	1997 - 1997 -					s lowed	
			2.		- 4 ( )	57	inci / Day, noui	5 1 I OHE G	
10-3/4	573	190	Choke Size	Method	of Testing:				
لمر ہے	363h	150	Acid or Frac	ture Treatment	(G <del>ive</del> amounts of	materials used,	such as acid	, water, oil, and	
5-2/2	,7944	190	sand): 20al	bee gals at	1 4 20,000 3	the sead			
2	3276		Casino	Tubing	Date first oil run to	new	la fi		
								<del>.</del>	
					Bor Munioe				
			Gas Transpor	ter			<u> </u>		
marks :	••••••				•••••••			•••••••••••••••••••••••••••••••••••••••	
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I hereby	v certify th	at the info	ormation given	above is true	and complete to	the best of my h	inowledge.		
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proveu						(Company o	r Operator)		
017	CONSER	VATION	COMMISSIC	אר	By:	Satu			
		VALION		227		(Signa	ature)		
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·	. Hon ber Land	C. L. J. C. Y.	ration and the second	·····	Send	Communicatio	ns regarding	well to:	
le	OIL AND SI	S INGPED							
			1		NameC.C.		••••••		
		718, H	73. File		Address. 520	I Brondstar.	Hobbs. I		



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