NL MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (*CARS): 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.

E ARE HEREBY REQUESTIN Western-Yates (Company or Operator)			State 648	, Well No18	3.7 in	SW 1/4 SW	
			(Lease)	under.			
M Undt L	Sec		, T. 19-S , R 28-E	, NMPM., .East	Millman.7	Rivers	
			Courty Days Soundard 9/2	0/62 pm	te Deilling Go	mnleted 10/1/62	
Please indicate location:			Elevation 3398 GI	Total Depth	Date Drilling Completed 10/1/62 al Depth 1145' PBTD 1144'		
			Top Oil/Gas Pay 1087'	Name of Pro	d. Form. S	even Rivers	
D	C B	A	PRODUCING INTERVAL -	•••			
E	F G	H	Perforations 1087-931.	Depth		Depth	
_	22	"	Open Hole None	Casing Shoe	1145'	Tubing 1101'	
		 _ 	OIL WELL TEST - No	•		0)	
L	K J	I	Natural Prod. Test: test	bbls.oil,	bbls water in	hrs,min. Si	
1			Test After Acid or Fracture T				
M	N O	P	load oil used): 17 bbls			Choke	
	1				, motor 211 <u>a.s.</u>		
			GAS WELL TEST -				
90' F	SL & 330	FWL	- Natural Prod. Test:	MCF/Day; Ho	ours flowed	Choke Size	
ubing ,Co	sing and Comer	ting Reco	Method of Testing (pitot, bac	k préssure, etc.):		·	
Size	Feet	Sax	Test After Acid or Fracture T	reatment:	MCF/	Day; Hours flowed	
			Choke SizeMethod of				
7"	218	50					
4 1/2	1145	75	Acid or Fracture Treatment (G				
	1		sand): Treated w/250 g	(al. acid, 30,00 Date first new	00 lb. sd. &	574 bbls. lease	
2 3/8	3" 1101		Dance An the Proces Dur	in all mum to tanke	10/21/6	2	
			Oil Transporter Contine	ntal Pipe Line	Company		
			Oil Transporter Contine			RECEIVE	
marks:		······································				OCT 2 5 1962	
			•••••		***************************************		
I her	eby certify the	it the info	ormation given above is true as	nd complete to the b	est of my kno	wledge ESIA, OFFICE	
pproved.			<u>2</u> , 19	Western	a-Yates	*****************************	
		<u>.</u> . 100:	•	- 500	(Company or O	perator)	
C	OIL CONSER	VATION	COMMISSION	Ву:	(Signatur	W M	
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By: III To USINUS TO KEG				TitleProducti Send Con	nmunications	regarding well to:	
iela	OFL AND SA	INSPECT					
JII.	· · · · · · · · · · · · · · · · · · ·			Name Western	-Yates		
				Maille			