WEXICO OIL CONSERVATION CON Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well

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)			ember 1	(Date)
blf (C	Company or Op	etion erator)	Pederal-	OWABLE FOI Littlefield (Lease)	AB., Well N	lo 1	, i nS		
	Sec		T. 18-8	, R. 31- E	, NMPM.,		Undesign	atad	Pool
	Eddy		County. Da	ate Spudded	6-19-58	Date D	rilling Comp	leted]	10-5-58
Ple	ase indicate	location:	Elevation	Pay ###	To	tal Depth	De1	FBTD	900'
D	C B	A	PRODUCING I	NTERVAL -			OTH:		
E	F G	H		s_ 		70-5188 • pth sing Shoe		Depth Tubing	
L	K J	I	OIL WELL TE	ST -	bbls.oil.	bbls	; water in	hrs.	Choke min. Size
M	N O	P	Test After	Acid or Fractur	e Treatment (a	fter recovery	of volume o	f oil equal	l to volume of
•			GAS WELL TE		b15,011,	DD15 Wat	.e	. وه ۱۱۰	0120
			. Natural Pro	od. Test:	MC	F/Day; Hours	flowed	Choke Si	i ze
bing ,C	Casing and Cen		d Method of T	esting (pitot,	back pressure,	etc.):			
Size	Feet	SAX	Test After Acid or Fracture Treatment:MCF/Day; Hours flowed Choke SizeMethod of Testing:						
16*	1051,	1600	<u> </u>						
10-3,	/4 2417*	1800		cture Treatment	d Anid		.2		
7*	11,879	1350	Casing Press.	Tubing Press	Date fi oil run				58
3*	51451	-	1	orter					
marks	:			orter					
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I he	reby certify t	that the info	rmation give	n above is true	e and complete	e to the best	of my knowl	edge.	
provec	64		NOV 1 9 1	<u>- 19</u>	••••••	Gulf Ol	1Corport	rator)	
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Address