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NEW EXICO OIL CONSERVATION COMN
Santa Fe, New Mexico

FFR 2

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

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 Offsor 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.

				Lovington, (Place)	New Mest	ico, Janua	(Date)
WE ARE F	IEREBY R	EQUESTI	ING AN ALLOWABLE F	OR A WELL KNO	OWN AS:	W ritat	RTEP
, (Co	mpany or Op	erator)	Operator Com Clean (Lean T 195 R 31E	ke)			
Eddy	tter .		County. Date Spudded				
Pleas	se indicate l		Elevation 3490 Top Oil/Gas Pay 2167	Total	Depth 2177	PBTD	<u>*</u>
D	C B•	A	Top Oil/Gas Pay PRODUCING INTERVAL -	Name o	f Prod. Form	TACES DATE	<u>.u</u>
E	F G	H	Perforations None	Death		- Centh	
	r G	, n	Open Hole 10 ft	• Casing	Shoe 2167	Tubing 2	167.05
L	K J	I	OIL WELL TEST - Natural Prod. Test: 45	bbls.oil,	bbls wate	r in 24 hrs,	Choke min. Size
М	N O	P	Test After Acid or Fraction NO	ture Treatment (after	recovery of v	olume of oil equ	al to volume of Choke
660	N = 19	BOE	GAS WELL TEST -				
	ing and Cem		Natural Prod. Test: No. No. No. No. No. No. No. No		-		Size
Size	Feet	Sax	Test After Acid or Frac			_MCF/Day; Hours	flowed
8 5/8*	790.5	50	Choke SizeMeti				
5 1/2*	2167	100	Acid or Fracture Treatments sand): None	ent (Give amounts of r	materials used,	, such as acid, w	water, oil, and
2*	2167.0	5 -	Casing Tubing Press Press	Date first of the column do	new Jan.	26, 1960	
			Oil Transporter Cac				
lemarks:		<u> </u>	Gas Transporter				
Comaras		••••				•••••	
	•••••						
	oy certify th		ormation given above is tr 2 1960, 19		estern,	knowledge. Inc. Opera 9r Operator)	tor
OI	L CONSE	RVATION	COMMISSION	By: 15	Hall.	/. ?ature)	
iv: 1/1/2	(linus	dron	9	Title	dent		
Title OIL AND BAS INSPECTOR				Send Communications regarding well to: Southwestern, Inc.			
		-		Name		inc.	

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