EXICO OIL CONSERVATION COMM JONR EDEIVED NEW

Ravised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE APR 5

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed. Off or Gas well.

The completion of the complete o 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.

				Midland, Te	XA6	April 3	_
ME AGE	TIEDEDV I	DECLIESTI	NC AN ALLOWARIE FOI	(Place)	VN AC.		(Date)
WE ARE HEREBY REQUESTING Paul E. Haskins (Company or Operator)			Southern-Federal	, Well No	4 , in		
K Van L	Se	c30	(Lease) T. 19S , R. 31E	, NMPM., N	orth Hackb	erry-Ya	tes Poo
			County. Date Spudded				
	se indicate		Elevation 3412	Total Dep	oth 2300	PBTD	2193
			Top Oil/Gas Pay 2060	Name of F	rod. Form.	Yates	
D	C B	A	PRODUCING INTERVAL -				
E	F G	H	Perforations 2060-61	Denth	 	Depth	
			Open Hole	Casing Sh	10e	Tubing	2045
L	KJ		OIL WELL TEST -				Choke
-	x		Natural Prod. Test:	bbls.oil,	bbls water in	hrs,	min. Size_
			Test After Acid or Fracture				
M	N O	P	load oil used): 40 bi	ols.oil, <u>10</u> bb	ols water in 2	hrs, 0	_min. Size 2 !!
			GAS WELL TEST -				-
2316	1 - 22	78 W	Natural Prod. Test:	MCE/Days	Hours flowed	Chake	Siza
		menting Reco		· · · · · · · · · · · · · · · · · · ·			
Size	Feet	Sax					
	T	 	Test After Acid or Fracture			/Day; Hours	1 Towed
8-5/8	585	100	Choke Size Method	of Testing:			
4-1/2	2280	125	Acid or Fracture Treatment	(Give amounts of mat	erials used, suc	ch as acid,	water, oil, and
4-1/6	2200	123	sand): 20,000 gale. Casing Tubing	oil & 40,000	sand	·	
			Casing Tubing Press. 40# Press. 2	Date first new Off oil run to tan	ks 4-l-	61	
		 	Oil Transporter Per				
			i		-		
			Gas Transporter Non				
(emarks:		••••	***************************************	· · · · · · · · · · · · · · · · · · ·		*****************	
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I here			ormation given above is true	and complete to the	best of my kno	wledge.	
pproved		NPR 5 1	<u>961 , 19 </u>	Paul E	Haskins (Company or C		
			·.	In.	(Company or	1/1	
0	IL CONSE	RVATION	COMMISSION	Ву:	(Signatur	e)	
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":41_	OIL AND G	AS INSPECT		Sena Co	mmunications	ckaramit w	S 44 - \$57 1
. ITIE			T.T	Name Paul E.			
					irst Nation		Bldg.
				Address	idland, Te	XAS	

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	OIL CONSEIN DISTRICT
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