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.

					1941		Hobbs, Net	4 W6327CO	W 0/ 24	
						(Place)			(Date	e)
ARE	HER	EBY RI	EQUESTI!	NG AN ALLOWA State **3	ABLE FOR	A WELL KI	NOWN AS: 1-34	in NW	NW 1/4	1/2
				, T. 2 6						Ро
Ed	dv			County. Date 5	inudded 1	/29/59	Date Dril	ling Complete	_d 3/3/59	
		dicate le		Elevation	JUNO W	iota	1 Debtu	<u> </u>	D1D	
			T . 1	Top Oil/Gas Pay	25121	Name	of Prod. Form	Delawa	re	
D	C	В	A	PRODUCING INTER	VAL -					
				Perforations						
€	F	G	H	Open Hole 25		Dept Casi	h ng Shoe	Dej Tul	oth oing	
				OIL WELL TEST -						
L	K	J	I	Natural Prod. T		bbls oil. 1	bbls wa	ster in 24	hrs ch min	Choke n. Size
				Test After Acid						
м	N	10	P	lest After Acid					U.	noke
						15,011,	DDIS WALEI	111	, <u>, , , , , , , , , , , , , , , , , , </u>	
	, -			GAS WELL TEST -						
Ú.	<u>9)</u>	11-		_ Natural Prod. T	est:	MCF/	Day; Hours flo	owed	Choke Size	
bing ,	Casing	and Ceme	nting Recor							
Size		Feet	Sax	Test After Acid	or Fracture	Treatment:		MCF/Day;	Hours flowed_	
3-5/	800]	281	75 8:	Choke Size	Method	of Testing:		<u> </u>		
				Acid or Fractur	e Treatment	(Give amounts o	f materials us	sed, such as	acid, water,	oil, and
5-1/	24 25	512'	65 8]d\.	1000 gal	frac 1000	sand			
2-3/	8m th	og. at	25001	Casing 450#	Tubing 200	Date firs	t new 3/4	/59		
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				Gas Transporter						
				Gas Transporter						
marks	:		*****************							
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				ormation given at		Ford Char	oman & Ass	ociates	**	
prove	d				, 19	1		iny or Operate	1)	
		CONCE	DVATION	COMMISSION	,	Bv:	n Smith, 4			
	OIL (_	_/			, uere	i markette 4	Signature)		
. /	ML	On	nstro	ng		Title			ling well to:	
	·/			-/ .			nd Communic		ing wen to.	
tle	e-1			V		Name	1512 Pecc	s, Texas		
						Address				
						Variation				

Form C-110 Revised 7/1/55

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NEW MEAICO OIL CONSERVATION COM. ISSION SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company o	r Opera	tor Ford G	apman & As	sociates			Lease	State	"34"	!
Vell No.		Unit Lette				28 _{Poo}	1	ldest		
								, St	ate	
ounty	Eddy		_Kind of L						94	D 26
f well pro	duces of	il or conden	sate, give	location	of ta	anks:Unit	<u> D</u>	S 34T	20	R_ 28
uthorized	Transp	oorter of Oil	l or Conde	nsate	Cac	tus Pet.	Co.	· · · · · · · · · · · · · · · · · · ·		
11					Box	x 1567 M	idland	, Texas		
ddress	lGive	address to	which appr	oved co	py of	this form	m is to	be sent)	
uthorized	•	orter of Ga			. ,					
ddress	ı I ramal	orter or da		MOLES		Date	e Conn	nected		
daress	(Give	address to	which appr	oved co	py of	this form	m is to	be sent)	
Gas is n	ot being	sold, give	reasons ar	nd also e	xpla	in its pro	esent d	lispositi	on:	
		. 3	TSTM							
										
easons fo	or Filing	g:(Please ch	ieck prope	r box)	Ne	w Well				(4
Change in	Transpo	orter of (Ch	eck One):	Oil ()	Dry	Gas ()	C'hea	d()Co	nder	isate (
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hange in	Owners	nıp			Julei	Giv	ze exp	lanation	belo	w)
lemarks:						•	•			·
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Approved_			1	9	Tit	le Agent				
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