NEW MEXICO OIL CONSERVATION COMMISSION 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

					n, New Maxie	12-1	(Date)
A OF T	rorov n	FOLIESTI	NG AN ATTOWA	(Place) BLE FOR A WELL	KNOWN AS:		(Date)
				(078563), Well		L, inNE	1/4 1111 1/4
(Corr	DARY OF O	Derator)		(Lease)			
C Units Lott			, T?h, R	7 1 , NMPM.	, united lena		Poc
lo Arri	ba	,	County. Date Sp	oudded 10-21-57	Date Drill	ing Completed	11-9-57
	indicate		Elevation 67	33	otal Depth	PBT	2722
D C	В	A	-	51:61: N	lame of Prod. Form.	CALLED S	S. R. L. C.
هٔ ا			PRODUCING INTERVA	_	1) an	nd dead es	et.a
EF	P G	H	Perforations	1461-5480, 5488-5	epth	Depth	94U
֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓			Open Hole	C	asing Shoe 5639	Tubing	9_3479
	K J	I	OIL WELL TEST -				Choke
r 1	K J			st:bbls.oil,			s, 🗯 min. Size
				or Fracture Treatment (Choke
1	4 0	P	load oil used):_	17 bbls.oil,	bbls water i	n 24 hrs, _	min. Size 3
			GAS WELL TEST -				
Sec	ction 2	5	Natural Prod. Te	st:^	MCF/Day; Hours flow	vedCho	ke Size
ing Casi	ing and Cer	menting Reco		g (pitot, back pressure			
Size	Feet	Sax	Test After Acid	or Fracture Treatment:		MCF/Day; Hou	rs flowed
3 5/8	3h9	200	7	Method of Testing:			
				Treatment (Give amount	e of materials use	d. such as acid	d, water, oil, and
1/2	5639	240		o gal, crude and			
2	5479	_	Casing Loop	Tubing Date f	irst new	13-57	
	7417	 -		Fl Pase Natura			
]		_				MIN
	معدی	11 retie	Gas Transporter_	le foot per barr	2	A	PIJAID /
n arks:		······································					mo-m-957
		•••••					C 211 1957
T h		that the inf	ormation given abo	ove is true and comple	te to the best of m	y know cage.	COM. WAR.
r Hélen	y cermy	mer me un	DEC 20 ISRV	19 Stand			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
proved		***************************************		,	(Compan	y or Operator	
OI	L CONSI	ERVATION	COMMISSION	Ву:	Thasles N	ignature)	0
					rield Forest	_	
Origin	iai Sign	lea Emer	y C. Arnold	Title	Send Communica		g well to:
le Supe	rvisor Dis	t. # 3	•••••••••••••		Standard Oil		
				Address	Bear 1581, Fo	rmington,	NOT MEATING