## 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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

						Vexico	October 29. 1958
			o renomer	NO AN ALLONANTE E	(Place)	١¢.	(Date)
E AR	E HEI	REBY RE	QUESTI:	NG AN ALLOWABLE FO on Federa	OK A WELL KNOWN A	1.∷: :_S]	S 1/ SE 1/
	Comp	any or One	rator)	(Lease	)		
]	P	Sec	23	T 24N , R 2W	, NMPM., Wilde	eat	P∞l
#1m#1	Letter						
	Rio A	rriba		County. Date Spudded	Total Depth	SSJO1	GTRE DESCRIPTION
F	Please i	indicate lo	cation:	Top Oil/Gas Pay 3	27' (Perf. Name of Prod.	Form. Picti	ured Cliffs
D	C	В	A	PRODUCING INTERVAL -		<del></del>	
					7-3252; 3265-3275		
E	F	G	Н	Open Hole None	Depth Casing Shoe	3319'	Depth Tubing
L	К	J	I	OIL WELL TEST -		)	Choke
					bbls.oil, bb		
M	N		P		ure Treatment (after recove		Choke
11	"		x	load oil used):	bbls.oil,bbls w	ater inl	nrs,min. Size
	L			GAS WELL TEST -			
113	p's,	1175'E		Natural Prod. Test:	MCF/Day; Hour	s flowed	Choke Size
Lubing	,Casin	g and Ceme	nting Recor		, back pressure, etc.):		
Siz	·c	Feet	Sax	Test After Acid or Fract	ure Treatment: 914	MCF/Da	y; Hours flowed 3
	40"		<b>5</b> 0	Choke Size 3/4" Meth	od of Testing: Calcul	ated A.O.F	•
85	/8"	70'	50_		nt (Give amounts of materia	le used such :	es acid. water. oil. and
5 1	/2"	3309'	150	1			
				Casing Tubing	. water & 60.000# s	/ott	FIVE
				PressPress	oil run to tanks		LITEU Y
2"	,	3230		Oil Transporter	no Notunel Cos Com	any NOV:	3 1958
		***************************************		Gas Transporter Gas Transporter	so Natural Gas Comp		ON COM
emark	<b>cs</b> :		··	**************************************			ST. 3
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			•••••				1
I	nereby	certify th	at the info	ormation given above is tr	ie and complete to the best	t of my knowle	eage.
pprov	ed	<b></b>		NOV 3 1 <b>958</b> , 19	San Juan Gas	ompany or Oper	(OTCrator)
							RLY
	OIL	CONSE	RVATION	COMMISSION	Bywww.mwr.sawwa	(Signature)	At1
C	)rigin	al Sign	ed Eme	ry C. Arnold	Title. Agent		
y:				•••••••••••••••••••••••••••••••••••••••	Send Comm	unications reg	arding well to:
itle .S	upervi	sor Dist.	#.3		Name E. S. Ob	erly	
					Pov. 007	Farmingto	m, New Mexico
					AddressBOX 9919	- committee	THE RESERVE OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AN

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