

OIL CONSERVATION COMMISSION
P. O. BOX 671
SANTA FE, NEW MEXICO

WELL SUPPLEMENT NO. (NEW) (SE) _____ DATE _____

NOTICE OF FULL CONNECTION OR AUTHORITY TO ASSIGN ALLOWABLE
ALL VOLUMES IMPROVED IN MCP

The operator of the following well has complied with all the requirements of the Oil Conservation Commission and may be assigned an allowable as shown below.

Type of Connection _____ Date of Full Connection or Allowable Change _____
 Pool _____
 Lease _____
 Unit Letter _____ Sec. _____ Range _____
 Acreage _____ Revised Acreage _____
 Factor _____ Revised Factor _____
 Deliverability _____ Revised Deliverability _____
 A.D. Factor _____ Revised A.D. Factor _____

Signature _____ Supervisor _____

STANDARDIZATION OF OPERATIONAL CAPACITY					
WELL NO.	WELL TYPE	WELL STATUS	WELL TYPE	WELL STATUS	WELL TYPE
1	WELL	WELL	WELL	WELL	WELL
2	WELL	WELL	WELL	WELL	WELL
3	WELL	WELL	WELL	WELL	WELL
4	WELL	WELL	WELL	WELL	WELL
5	WELL	WELL	WELL	WELL	WELL
6	WELL	WELL	WELL	WELL	WELL
7	WELL	WELL	WELL	WELL	WELL
8	WELL	WELL	WELL	WELL	WELL
9	WELL	WELL	WELL	WELL	WELL
10	WELL	WELL	WELL	WELL	WELL

TOTAL AMOUNT OF (Current or Proposed) ALLOWABLE _____

PREVIOUS MONTH NET ALLOW. _____ REVISED MONTH NET ALLOW. _____

PREVIOUS MONTH CURRENT ALLOW. _____ REVISED MONTH CURRENT ALLOW. _____

IMPROVEMENT IN THE _____ MONTH PRODUCTION SCHEDULE.

REMARKS: _____

NOTICE OF SHUT-IN

The following described well has been Shut-in for Failure of Compliance:

Well No. _____ Pool _____ Date _____
 Lease _____
 Unit Letter _____ Sec. _____ Twp. _____ Range _____
 Effective date of Shut-in _____ Reason for Shut-In _____

A. L. PORTER, Jr., Director

By _____

