## 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.

						(Place	)		Au	(Date)
			•	NG AN ALLO						.,
·Rl ·Pa	BO-Mat (Compar	ural ( ny or Ope	ias Comp rator)	any Cany	on Largo (Lease)	<b>U<u>ni</u>t.</b> , Well	No8	, 1 <b>n</b> .	SW	<b>/4/4</b> ,
Unit	E	, Sec	1	., T2hN	., R7N	, NMPM	i., LargoC	anyonP.	.CExt	Pool
Ric	a Arri	lba			•	-				5-27-58
Please indicate location:								x8030C.0. 2550'		
D	C	В	A	Top Oil/Gas P PRODUCING INT		Perf.)	Name of Prod.	Form. Pic	tured (	liffs
E	F	G.	H	Perforations			Depth	<b>A</b> 590	Depth	Ol-CZ t
X	V	-	<u> </u>	Open Hole		·	Casing Shoe	2509	iubing_	2467'
L	K	J	I				*			Choke min. Size ual to volume of
М	N	0	P	load oil used	i):				•	Choke min. Size
		<u> </u>		GAS WELL TEST	•					
_1800	'N, 91	8.4	· · · · · · · · · · · · · · · · · · ·	. Natural Prod.	Test:		MCF/Day; Hours	s flowed	Choke	Size
			nting Recor	d Method of Tes	ting (pitot,	back pressur	e, etc.):			
Size		Feet	Sax	Test After Ac	id or Fractu	re Treatment:	7739	MCF/	Day; Hours	flowed 3
8 5/8	8"	120'	150	Choke Size	3/4" Metho	d of Testing:	Calcul	ated A.O.	.F.	
5 1/2	2" 2	2579'	200	1						water, oil, and
				Casing	Tubing	Date	first new un to tanks			
		1	· · · · · · · · · · · · · · · · · · ·	Oil Transport						
2"		2467		Gas Transport	er EL	Paso Natu	ral Gas C	ompany (		4
Remarks		••••••		*************	· · · · · · · · · · · · · · · · · · ·	: :			WG15	1958
Y L.				rmation given a		e and comple		/ SIL	- CON	COM /
ı no Approve			AUG 1.5.1			E	PasoNat	ural Gas	Company cerator)	
	OIL C	ONSER	VATION	COMMISSIO	<b>N</b>	Ву:	original Sig	ned D. C.	Johnst	<b>00</b>
By: O1	rigina			y C. Arnole	<u>á</u>	Title	Petroleum Send Commi	Engineer unications re	egarding v	vell to:
Title	••••••	Suç	pervisor Di	»c ∦, ♥	***************************************	Name	E. S. Obe	rly		
						Address	Box 997,	Farming	ton, Ne	w Mexico

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