NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

3/10

(Form.C-104) evised 7/1/57

New Well Recommission

REQUEST FOR (OIL) - (SAS) ALLOWABLE

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.

WE ADE	UFD	FRV D	FOUTEST	ING AN ALL	OWADIE EC	(Place	:)		.co	(Date)	
BOLAC	K-GF		INC.			IT, Well			Nd	4. SW 1/4	
L	I Letter	, Sec	11	, T25 N	•	•	ſ., <u>F</u>	uerto C	hiquito)P00	
			location:	County. Da	ate Spudded	.8-6-64 KB		Drilling 0	capleted PBTD	8-29-64	
	DC		A		Pay 664						
		В	^	PRODUCING I					٠		
E	F	G	H	Perforations Open Hole	6648-87	I	Depth Casing Shoe_	6648 '	Depth Tubing	5323 '	
L	K	J	I	OIL WELL TES	_	bbls.oil,	bl	bls water in	hrs,	Choke min. Size	
M	N	0	P	Test After A	Acid or Fractu	re Treatment	(after recov	ery of volume	e of oil equ	al to volume of Choke min. Size P	
		<u> </u>	<u></u>	GAS WELL TES			MCF/Dav: Hour	rs flowed	Choke	Si ze _	
Tubing Casing and Cementing Record				Method of Te	esting (pitot,	back pressure	e, etc.):			flowed	
13-3/	13-3/8 312 350				Method						
7-5/	7-5/8 57		400	1 .					h as acid, w	vater, oil, and	
5-1/2 (line)	2 1	296	160	Casino	Tubing Press.	Date f	irst new		mber 8.	1964	
2-7/8	8' 5	311	-	1	ter Shell				AINE		
Remarks:	•••••••	••••••	•••••••••••••••••••••••••••••••••••••••					0	PLIVE	0/	
		**********	•••••••••••••••••••••••						OV : 2:9	ô 4	
I here Approved.	e by ce NOV	rtify th 1 2 196	at the info	rmation given	above is true	and complete	WINT THE THE	of mylknov	Medicon. DIST.		
c	OIL CO	ONSER	VATION	COMMISSIC	ON	Ву:	All	ompany or O (Signature	lyce		
By: Original Signed Emery C. Arnold						Title Vice-President Send Communications regarding well to:					
Title	Title Supervisor Dist. # 8						Name Albert R. Greer				
						Address		troleum ngton, 1		Building ico	

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OIL CON. RVATION CHAMISSIO
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