

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
~~Recompletion~~

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Albuquerque, New Mexico, June 13, 1957

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

J. Felix Hickman, Well No. 2, in SE 1/4, SE 1/4,
(Company or Operator)

Sec. 5, T. 24 N., R. 3 W., NMPM, Undesignated Pool
Unit Letter

Rio Arriba County. Date Spudded May 19th, 1957, Date Completed May 26, 1957

Please indicate location:

D	C	B	A
E	F	G	H
I	K	J	I
M	N	O	* P 1050'

Elevation 6978 Total Depth 3296', P.B.

Top gas pay 3198' Name of Prod. Form 3198'

Casing Perforations: 3230-3240 & 3252-3276 or

Depth to Casing shoe of Prod. String

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

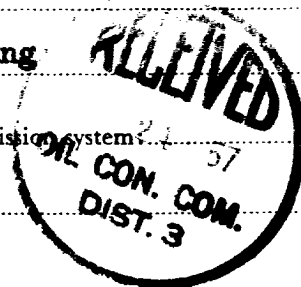
Based on bbls. Oil in Hrs. Mins.

Gas Well Potential

Size choke in inches 2-3/8" tubing

Date first oil run to tanks or gas to Transmission system

Transporter taking Oil or Gas:



Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 24 1957, 19

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

J. Felix Hickman
(Company or Operator)
By: J. Felix Hickman
(Signature)

Title owner

Send Communications regarding well to:

Name J. Felix Hickman
4115 Avenida La Resolana, N. E.
Address Albuquerque, New Mexico

OIL CONSERVATION COMMISSION		
AZTEC DISTRICT OFFICE		
No. Copies Received <u>4</u>		
DISTRIBUTION		
	NO. FURNISHED	
Operator	<u>1</u>	
Santa Fe	<u>1</u>	
Proration Office	<u>1</u>	
State Land Office		
U. S. G. S.		
Transporter		
File	<u>1</u>	<input checked="" type="checkbox"/>