Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well **MARSHAPISTER**

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.

| | | | | Farmington, (Place) | New Mexico | ••••• | 8/15/59 (Date) |
|---------------------------------------|----------------|--|--------------------------------|---|---------------------|---|---|
| | | | ING AN ALLOWABLE | FOR A WELL KI | | | • |
| andard C | Oil Components | eny of | Fexas Federal 9 | . 2078301,)Well No. | 12-3 , in | NX | 1/4 |
| | Sec | | T. 24N , R. 1 | • | Bisti Lower G | allup | Poc |
| - | | | County. Date Spudd | ed 7/9/59 | Date Drilling | Completed | 7/21/59 |
| Please indicate location: | | | Elevation 6920 | | 1 Depth 5600 | PBTD | 5550 |
| D | C B | TA | Top Oil/Gas Pay 5 | Name Name | of Prod. Form. | Gallup | |
| × | | | PRODUCING INTERVAL - | | | | |
| E F | F G | H | Perforations 51,51 | 1654721. 54881- | 51,921 | Depth | |
| " | | | Open Hole None | Casir | ng Shoe <u>5600</u> | Tubing_ | 5520 |
| L | K J | | OIL WELL TEST - | | | | |
| " | , J | I | Natural Prod. Test: | bbls.oil, | bbls water i | nhrs, | Choke min. Size |
| | | | Test After Acid or Fr | acture Treatment (afte | er recovery of volu | me of oil equ | |
| M | N O | P | load oil used): 153 | bbls,oil, | bbls water in 2 | hrs, O | Choke min. Size_ _Pim |
| | | | GAS WELL TEST - | | | | |
| ******* | Sec 12 | | Natural Prod. Test: | MCF/I | Day; Hours flowed | Choke | Size |
| ibing ,Ca | sing and Cem | enting Reco | | | _ | | |
| Size | Feet | Sax | Test After Acid or Fra | | | | |
| 8 5/8 | 338 | 200 | Choke SizeM | ethod of Testing: | | - · · · · · · · · · · · · · · · · · · · | |
| | | 200 | Acid or Fracture Treat | ment (Give amounts of | materials used, su | uch as acid, | water, oil, and |
| 结 | 5600 | 300 | - cand): 20.000 gg | 1 A11 and E0 A0 | Off mand who re | | |
| 2 | 5520 | - | Casing Tubir Press. 2400 Press | ng Date first | new | · | |
| | - | | Oil Transporter Fou | r Corners Pipel | ine Co. | rives | . |
| · · · · · · · · · · · · · · · · · · · | <u> </u> | <u> </u> | Gas Transporter | | (ot) | | 1 |
| marks: | | | | | \ Kri | 361 | |
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| | | | ••••••••••• | •••••• | | CON | · • • · · · · · · · · · · · · · · · · · |
| I here | by certify th | at the info | ormation given above is | true and complete to | the best of my kno | owiedyte. | |
| proved | | QUA | <u>2 1 1959</u> , 19 | Standard | 1 Oil Company | | |
| | | | | _ | (Company or (| operator) | |
| | | | COMMISSION | By: | (Signatu | re) | |
| | - | ., | C. Acres | Title Fiel | ld Foreman | | . |
| Supervisor Disk 1 | | | | Sep | Communications | regarding w | ell to: |
| tle | | **************** | | Name | | , WA 4GAG | |
| | | | | | r 1581. Farmir | oton No | w Nevice |

| OIL CONSER | VATION COMMIS | SSION | | |
|--|--|-----------|--|--|
| AZTER DISTRICT DEFICE | | | | |
| No. Cuples | CONSC 6 | | | |
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| State Land Office | ÷ 4 | : | | |
| U. S. G. S. | | | | |
| Transporter . ! | | | | |
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