NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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.

			¥	LHINT POLS NOW (Place)	:00 <u> </u>	291955 (Date)
E ARE H	IEREBY I	REQUESTIN	IG AN ALLOWABLE I	OR A WELL KNOWN AS:	611	
(Co	marren mpany or O	nerator)	Federal H.M.O	11639, Well No2	, in. 1/4	1/4,
N)	Se	c4	, т25 х , г 7	, , NMPM., Largo Canj	on P. C. a	Pool
(• **** * /	1			May 23, 1955 Date Con		
Pleas	se indicate	location:	Ounty. Date Spudded	ப்பூற Date Con	npleted une 1	,1955
			Elevation 637	2 Total Depth 2289), P.B	·····
			Top oil/gas pay	2190 Name of Pro	d. FormPict	ured Cliffs
			Casing Perforation	3:		or
			Depth to Casing sh	oe of Prod. String2193		•••••
•			Natural Prod. Test.			BOPD
			based on	bbls. Oil in	Hrs	Mins.
••••••	•••••		Test after acid or si	not		B OPD
Casing Size	and Cemen Feet	ting Record	Based on	bbls. Oil in	Hre	Mins
3126	reet	Sax		248 MCF after Sans		
5/8	106	75				
5 ½	2193	100	Size choke in inche	s 0.967		
			Date first oil run to	tanks or gas to Transmission syste	m: Nove abe:	30 , 1955
			Transporter taking	Oil or Gas: B1 Paso Nat	iral Gas Co)
		<u> </u>	•			
narks:	nitial	potenti	al test data b	y #. J. McConathy,	solectric,	Inc
a vor	14 V-1C	C-D SUDE	nitted July 13,	ようう	•••••••••••••••••	
I hereb	v certify +l	nat the inform	nation given above is to	ie and complete to the best of my	knowledge	COUNTY
			12 - 2 , 19 50		nen	
			2.		or Operator)	
			COMMISSION	By:(Sign	nature)	for our of
		sy C C	Curoles	Owner Title		101.3
		pector Dist	ŵ	Send Communication	ons regarding wel	l to:
			E. M. T. T.			

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