REQUEST FOR (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.

				Hebbs (Place)	New Maxic	10	Septem	ber11,1957
gnolia		m Company	G AN ALLOWABLE 7 Jicarilla (L	#H# Well			SE	4NE1/4,
H	Sec.	11 ,	T. 26N , R.	3 ₩ , NMPM	, Undesi	gnated P	ictured	Cliffs Pool
Unit Let			0 . 5 . 6 . 11	. 7_12_57	Dode	. D-4114 0		79957
			County. Date Spudd Elevation 7127	ed	 Total Depth	6050	PBTD	6010
Please indicate location:		Top Gas Pay 36						
D	C B	A :	PRODUCING INTERVAL -	<u> </u>			Udag Island	T THE PLANE D
	16501			-4-4				
E	F G	H	Perforations		Depth	/050	Depth	0/4/
-		990	Open Hole		Casing Shoe_	6050	Depth Tubing	3080
	,		OIL WELL TEST -					~ .
L	K J	I	Natural Prod. Test:	_bbls.oil,	b	ols water in	hrs,	Choke min. Size
			Test After Acid or Fr	acture Treatment (after recov	ery of volum	e of oil equ	al to volume of
M	N O	P	load oil used):	bbls.oil.	bbls	water in	hrs.	Choke
							''- "'	
			GAS WELL TEST -					
· · · ·			Natural Prod. Test:	_ 	MCF/Day; Hou:	rs flowed	Choke	Size
ubing ,Cas	ing and Com	nting Record	Method of Testing (pi	tot, back pressure	e, etc.):	400mm		
Size	Feet	Sax	Test After Acid or Fr	acture Treatment:	2163	MCF	/Day; Hours	flowed 3
		-	Choke Size 3/4" M	ethod of Testing:	Back Pr	essure		-
10 3/4	306	200	~======================================					
7 5/8	۷	200	Acid or Fracture Trea	tment (G ive amount	s of materia	ıls used, su	ch as acid,	water, oil, and
	Top		sand): 40,000 ga	ng Date f	000# max	<u>d</u>		
5<u>}</u>	3827	100	Casing Tubi Press 3/00 Pres	ng Date i soil ru	in to tanks_			
	Bottom		Oil Transporter •					
<u>5}</u>	6050	260	Gas Transporter Page		et Pine	Line Cor	noration	- Weiting
emarks:			Gos Transporter					
CHIAFES :					,.,			
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I hereb	y certify th		nation given above is		te to the be	t of my kno	wiedge.	08 - 5
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OI	L CONSEI	RVATION (COMMISSION	Ву	OLD ILL	Signatu)		
			<i>C</i> : A *-	ه عدد				
y: Orig	inal Sign	ed Emery	C. Arnold	TitleD1	Sand Com	uperinte	ndent, No regarding w	ell to:
Tala Sur	ervisor Dis	# 3					negarding w	
ttie50)			***************************************	NameI	36£2406			
				عمد الراب الم	iotbs, Ne	w Mexico)	
				Address	ittn: Le	e E. Rob	inson, J	P.

	 OIL CONSERV	ATION COMMISSION			
		STRICT OFFICE			
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