DISTRIBUTION SANTA FF FILE U.S.G.S. LAND OFFICE TRANSPORTER QAS PRORATION OFFICE

OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

4-MMOCC 2-Compass (Deriver) 1-Compass (Farm)

1-El Paso Prod. 1-File

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

				Farmingt	on, New Mexic	X9	11-2-61
				(Place)	·		(Date)
		-	NG AN ALLOWABLE F				-
			. Idendrith Fede		1–10 , in	SE	1/4N.5
(Co	ompany or Op Sec	10	(Leas ., T. 26N , R. 7N		Basin-Dak	rta	Por
Unit L	piter						
Rio	Arriba		County. Date Spudded	9-1-61	Date Drilling	Completed	*******************
Plea	se indicate l	ocation:	Elevation 6668 G.I Top Oil/Gas Pay 710				
D	C B	A					
			PRODUCING INTERVAL -	7238-50,	725 8-64	N. 627.2	#999-30
2	F G	H	Perforations 7104-71				
~		I	Open Hole Mone	Casing	Shoe 7453	Tubing_	7,505
	77 -	 	OIL WELL TEST -				Choke
	K J	I	Natural Prod. Test:	bbls.oil,	bbls water i	nhrs,	min. Size
			Test After Acid or Fract	ture Treatment (after	recovery of volu	me of oil eq	
М	N O	P	load oil used):	bbls.oil,	_bbls water in'	hrs,	Choke min. Size
		1 1	GAS WELL TEST -				
	<u> </u>		Natural Prod. Test:	MCF/D:	v: Hours flowed	Choke	Size
	(FOUTAGE)	nting Recor					
Size	Feet	Sax	Test After Acid or Fract			F/Day: Hours	flowed 3
	1		Choke Size 3/4" Meth				
9-5/8	257	200					
5-1/2	7490.54	250	Acid or Fracture Treatment sand): 250 gal. B.	ent (Give amounts of	materials used, su	och as acid, D.000# #	water, oil, and
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2-3/8	7295.02		Casing Press. 2359 Press.	2082 XIDGOTED	100	-31-61	
			Oil Transporter			ret	11/1
			Gas Transporter			/RH. F	
marks:	CAOF	2459					· · · · · · · · · · · · · · · · · · ·
			***************************************			NOV	6 1961
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I here	by certify th	at the info	ormation given above is tr	rue and complete to	the best of my kn	owledges of	Т. З 🥖 🔠
proved	#0V6†9	61	, 19	Compa.ss	(Company or	Operator)	
			COMMISSION	_	al signed by T	. A. Duga	<u></u>
				Care	Signation Signature (Signature)		
			ry C. Amold	Send	Communications Dugan		well to:
leSuper	visor.Dist#	L. 3		Ivaine			N M
				1.00	7 H. Dustin.	Let Lating	con, none

STATE OF NEW MEXICO

OIL CONS RVATION COMMASSIO

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