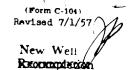
NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE



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.

				•	•	Farming (Place)	ton, New Me	xico	
WF ARE	HERI	ERY RI	EOUESTI	NG AN ALLOW	ARLE FO	` ,	NOWN AS:		(Date)
								in NW	1/4 NW 1/4
(Company or Operator)					([0000)				,
) II=M	Letter	, Sec.	24	T. 25 N	R. 12W	, NMPM.,	Bisti	••••••••••••••	Pool
				County. Date					
		dicate le							
		<u> </u>	1 1	Top Oil∕ ©gg Pay	4874	Name	e of Prod. Form.	Gallup	
D	С	В	A	PRODUCING INTER	IVAL -				
X		<u></u>		Perforations 4	8 74- 93.	4907-25, 49	34 - 49 , 4 95 5	- 69 , 49 73 -	- 39
E	F	G	H			Dept	th ing Shoe 5013	Depth	
				OIL WELL TEST -					
L	K	J	I			bble oil	bble wate	:-	Choke s,min. Size
									equal to volume of
M	Ñ	0	P						Choke min. Size 2*
						DISCOII,	DDIS Water In	1 _ nrs,	min. Size 2"
		<u>. </u>	·	GAS WELL TEST -					
					'est:	MCF/	Day; Hours flowe	dChol	ke Size
•			nting Recor	Method of Testi	.ng (pitot,	back pressure, e	etc.):		-
Size		Feet	SAX	Test After Acid	or Fractur	e Treatment:		_MCF/Day; Hour	rs flowed
8-5/8	, 1	112 100		Choke Size	Method	of Testing:	·····		
				Acid or Fracture	e Treatment	(Give amounts o	f materials used	, such as acid	, water, oil, and
4-1/2	50)13	15 0	sand): 50.00	O gal. c	rude 2#/gal	. sand + 2	00 gal. mu	ul acid
0.4/0				1	7 1			_	
2-1/2	48	375					Line		1/2/
				1		XXXXI G. X J		Off	WFD
r Remarks :				Gas Trensporter				1/1/DI	
								MAY 1	4 1959
							••••	A OH CO	N. COM.
I he	eby cer	rtify tha	it the info	rmation given ab	ove is true	and complete to	o the best of my	knowledge D!	ST. 3
Approved		MAY	1 4 1959				11 Company		
-pp.ovou					,	_		or Operator)	
(OIL C	ONSER	VATION	COMMISSION		By:	3. W. SHEPARD	•••••	
: ∩∞	ginal	C:	a n			B.W.Sh	eber a	nature)	
By:	_			y C. Arnold	*********	Title Explo Sen	itation Eng. d Communication	in eer ons regarding	well to:
Title	Supen	visor Di	st. # 3	, 		NameSh	ell Oil Com	pany	
i						Address70	5 W. Munici	pal Drive,	Farmington N.M.

·				an-u		
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