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## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

## REQUEST FOR (GAS) ALLOWAPLE

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.

|                           |   | -             | •                  |                       | Denver,                    | Colorad          | 0                  | Septe                     | mber 13, 196<br>(Date)                  |
|---------------------------|---|---------------|--------------------|-----------------------|----------------------------|------------------|--------------------|---------------------------|---|
| W.E ADE F                 | IERERY R                                | EOUEST        | ING AN ALLO        | WABLE FO              | ` '                        | NOWN A           | S:                 |                           | ,                                       |
|                           |   |               | ical-Federal       |                       |                            | _                |                    | NE ,                      | NE 1/4                                  |
| (Co                       | mpany or O                              | perator)      |                    | (Lease)               | •                          |                  | -                  | •                         | • • • •                                 |
| Α                         | Sec                                     | 19            | , T. 26N           | ., R 7W               | , NMPM.,                   | Basin            | Dakota             |                           | Pool                                    |
| Unit Le                   |   |               |                    |                       | 6-9-63                     | Dada I           |                    | leted                     | 6-25-63                                 |
| Rio Arriba                |   |               | County. Dat        | te Spudded<br>6202 Di | Total                      | l Denth          | 6682               | PRTD                      | 6675                                    |
| Please indicate location: |   |               |                    |                       | Name                       |                  |                    |                           |   |
| D                         | C 29                                    | A A           |                    |                       | Name                       | 01 7100.         | O1 iii •           | Vest Le                   | <del></del>                             |
|                           |   |               | PRODUCING INT      | ===                   |                            |                  |                    | <b>57</b> ; 6 <b>66</b> 1 |   |
|                           |   |               |                    |                       |                            |                  |                    | D - 41                    | 76; 6592; 66                            |
| _                         | F G                                     |               | Open Hole          |                       | Depth<br>Casir             | ng Shoe          | 6681               | Depth<br>Tubing           | 6630                                    |
| s                         | ection                                  |               | OIL WELL TEST      |                       |                            |                  |                    |                           |   |
| L                         | K J                                     | I             |                    | -                     | bbls.oil,                  | hh1              | c water in         | hee                       | Choke                                   |
|                           | ***                                     |               | 1                  |                       |                            |                  |                    |                           |   |
| м                         | N O                                     | . =≠ Þ        | ┥                  |                       | re Treatment (afte         |                  |                    |                           | Choke                                   |
| "                         | มีนั้นเกิด<br>เลียงรัชก                 | •             | load oil used      | d):l                  | obls,oil,                  | bbls wa          | ter in             | hrs,                      | _min. Size                              |
|                           | res 10                                  |               | GAS WELL TEST      | <u>-</u>              |                            |                  |                    |                           |   |
|                           | IL - 790                                | FEL           | Natural Prod.      | Test:                 | MCF/I                      | Day; Hours       | flowed             | Choke                     | Size                                    |
| tubing Cas                | FOOTAGE)                                | enting Rec    | ord Method of Te   | sting (pitot,         | back pressure, e           | tc.):            |                    |                           |   |
| Size                      | _                                       | Sax           |                    | <b>uldenr</b> Fractu  | re Treatment:              | 2087             | MCF,               | /Day; Hours               | flowed_3                                |
|                           | 1                                       |               |                    |                       | d of Testing:              |                  |                    |                           |   |
| 8 5/8"                    | 175'                                    | 125           | <u> </u>           |                       |                            |                  |                    |                           |   |
| / 1/011                   | (601                                    | 200           | XXXXX Fract        | ure Treatment         | Give amounts of and 76,000 | f material:      | s used, suc        | ch as acid,               | water, oil, and                         |
| 4 1/2"                    | 6681                                    | 200           |                    |                       |                            |                  |                    |                           | WIA WY                                  |
| 2 3/8"                    | 6630                                    |               | Casing Press. 2276 | Tubing<br>Press. 2    | Date first<br>oil run to   | t new<br>o tanks |                    |                           |   |
| <b></b>                   | <del> </del>                            | <del> </del>  |                    | ter                   |                            |                  |                    |                           |   |
|                           |   |               |                    |                       | Paso Natural               | Gas Co           | moanv              | 1                         | PEMAR                                   |
| <b></b>                   | - <del> </del>                          | ·•            | Gas Transport      | ter                   | 100011000                  |                  |                    | 153                       |   |
| Kemarks:                  |   | *****         | ····               |                       |                            |                  |                    | * , *                     |   |
|                           | ·····                                   | ·····         |                    | •••••                 |                            | **************** |                    | <i>S</i> .                | ि हैं हैं                               |
|                           | ••••••                                  |               |                    |                       |                            |                  | -£ b               | lada-                     | - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 |
| I herel                   | by certify t                            | hat the in    | formation given    | above is true         | e and complete to          | o the best       | or my kno          | wiedge.                   |   |
| Approved                  | SEP 1.6                                 | 1963          |                    | , 19                  | <b>E.I</b>                 | Cha              | mpany of C         | perator)                  |   |
|                           |   |               |                    |                       | - 4                        |                  |                    | - di-                     | Sand !                                  |
| O                         | IL CONSE                                | RVATIO        | N COMMISSIO        | N                     | By:                        | <u></u>          | Signatur           | re b                      | The state of the                        |
| •                         |   | سامت المساملة |                    |                       |                            | Fun              | dingsla<br>n Manag | na, Jr.<br>er             |   |
| By:                       | LIGIUSI 2                               | igned E       | mery C. Ara        | iold                  | TitleSen                   |                  |                    | regarding w               | ell to:                                 |
| Title Su                  | pervisor Di                             | st. # 3       |                    | .,                    | Name K.                    | L. Fun           | dingsla            | nd                        |   |
|                           | • |               |                    |                       | 14                         | 02 Denv          | er U. S            | . Nation                  | al Center                               |