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TRANSPORTER	GAS		i		
PRORATION OFFICE					
OPERATOR	OPERATOR				

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (SXS) ALLOWAPLE

New Well

(Form C-104)

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.

into the	stock tank	s. Gan must	be reported on 15.025 psia at 60° Fahrenheit. FARMINGTON, NEW MEXICO 5/29/64 (Place) (Date)
48	DRILLIN	G COMP	IG AN ALLOWABLE FOR A WELL KNOWN AS: ANY, JICARILLA #287, Well No 2, in NE
(Com	pany or Ope , Sec.	28	T 27N R 1E NMPM. PUERTO CHIQUITO Pool
Unit Lette	₩ Arriba		12/8/62 Date Drilling Completed 5/30/63
	indicate le		County. Date Spudded
X	i i	A	PRODUCING INTERVAL -
E I	P G	Н	Open Hole 804 To 1876 Depth Casing Shoe 804 Depth Tubing 1830
L I	K ir	I	OIL WELL TEST - Choke Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size
M 1	1 0	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 9 bbls.oil, 0 bbls water in 24 hrs, min. Size
			GAS WELL TEST -
bing ,Cas		O FWL enting Recor	Natural Prod. Test: MCF/Day; Hours flowed Choke Size Method of Testing (pitot, back pressure, etc.): MCF/Day: Hours flowed
Sire	Feet		Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing:
<u>5ŧ</u>	804	40	Acid or Eracture Treatment (Give amounts of materials used, such as apid, water, oil, and sand): 500 GALLONS. 158 ACID FOLLOWED WITH 60 BBLS OIL.
			Casing Tubing Date first new oil run to tanks 5/28/64
			Oil Transporter INDEPENDENT OIL COMPANY
			Gas Transporter
marks:	NATU	IAL PRO	DUCTION PUMP TEST PRIOR TO ACIDIZING INDICATED 1-2 BOPD.
I herel	by certify to JUN 2 2	hat the inf 1964	ormation given above is true and complete to the best of my knowledge. RLULIVLD S&B DRILLING COMPANY (Company or Operator) JUN 32 1964 (Company or Operator)
0:	IL CONSE	RVATION	C Arnold PARTHER
	enal Siz		Send Communications regarding well to: Name. S & B DRILLING COMPANY Address. 158 PETROLEUM CENTER BLDG. FARM
	LIGHT TIEST		4444444444444