NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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° Fabrupheit.

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				(Place	•		(Date)	
hare b	GREBY &	EQUESTI	NG AN ALLOWABLE	ESR THEL	L KNOWN AS:	SE in 1/a	SW	
(Co	pany or Op	eratory	28 % (Le	45)	Blanco Me		· • • • • • • • • • • • • • • • • • • •	
	, Sec	*************	, T, R	, NMPN				
16 Arr	iba		County. Date Bradde	10-21-59	Data Drefilde	er Completeda	11-17-5	
			ElevationCLOCA	<u> </u>	Total Depth	PBTD	010150	
Pleas	e indicate l	ocauon:	Top Oil/Gas Pay	(PERI.)	_Name of Prod. Form	Mess verde		
D	C B	A	Top Oil/Gas Pay PRODUCING INTERVAL -	6480-6490; 6600- 6 614;	6519-6526; 653 6622-6632	4-6541; 6 5 66	-6576;	
E	F G	H	Perforations House Open Hole		Depth 6772 Casing Shoe		660	
L	K J	I	OIL WELL TEST - Natural Prod. Test:	bbls.oil	,bbls wate	r inhrs, _	Ch min. Si	
	N O	P	Test After Acid or Fractional load oil used):	cture Treatment	(after recovery of w	olume of oil equa	l to volume	
	X							
15'8, :	1479 W -	نـــــــن	GAS WELL TEST -					
			Natural Prod. Test:				•	
oing ,cas	ing and Gem Feet	Sax						
0.2/4	241	750	Test After Academor Fra			:0.F°,	10wed	
0 3/4	547	150	Choke Size Me	thod of resting	·			
7 5/8"	4529	130	Acid or Fracture Treatment & gal	ment (Give amou • Water &	ots of materials used 50,000# send.	, such as acid, w	ater, oil,	
5 1/2"	2265	375	sand): Casing 10/9 Tubing	910/9 Date	first new			
2 3/8"	6682		Press. Press					
_ 3, -			Con Transporter			114	JVFN	
			Gas Transporter		***************************************			
marks								
						/oir co	N COM	
	•		ormation given above is			porting Corn	oration	
proved		JAN	1.3.1960 , 19	••••	(Company	or Operator)	••••••	
^-	I COMP	DI/ATION	COMMISSION	Bv:	ORIGINAL SIGNE	A.M. SMITH		
			I COMMISSION		Petroleum Engin			
itle Supervisor Dist. # 3				Title	Title			
iiC	· · · · · · · · · · · · · · · · · · ·			Name	Box 997, Farmi	noton Nev N	lexico	
					DOL 99; , Farmi			
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