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

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

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-466					(Place)		(Date	
		~			WELL KNOWN			
Com	pany or Ope	rator)		(Lease)	, Well No 90			
E	Sec.	35.	, T 27	, R. 10	, ММРМ.,	ulcher Ku	n Pictured	11191
					Date			
			County. Da Elevation	6644	Total Depth	2470		<i>3</i> / 00
Please	indicate lo	cauon:			Name of Frod.			
	B	A	PRODUCING IN					
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E	r G	H			wepth Casing Shoe	0k70	Ser, th	
					Casing Shoe	2410	:ucing	212
	(J	I	OIL WELL TES	<u> </u>				Chox
			Natural Prod	. Test:	bbls.oil,bt	ds water in _	hrs,m	Size
			Test After A	cid or Fracture T	reatment (after recove	ery of volume o	of oil equal to vi	lume d
M	1 0	P	load oil use	d):bbls	oil,rtls v	water in	hrs,min. '	ze
		1 1	GAS WELL TES	<u> </u>				
· 	t		Natural Speci	— -	MCF/Day; Hour	re Claund	Trans Class	
Mag Coat	ing and Ceme	nting Recor						
Sire					x pressure, etc.):			
40			Test After Acid or Fracture Treatment: MCF/bay; Hours flower Choke Size Method of Testing:					
9-5/8	143	100	Choke Size	me (nos ci	rescings	·		
-1/2	2470	150	Acid of Frac	ture Treatment (G	ive amounts of materia	ls used, such	as ocid, water,	ii, an
			sand):					
1-1/4	2375		Casing	Tubing	Date first new pil run to tanks			
			-					
			Can Transpar	RI Page	Natural Gas		_	
emarks:	Installe	ek on pr	Gil Transpor	ter Kl Pas Lyes at follo	o Natural Gas owing depths:	1299, 1551	, 1744, 1935	_
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I hereb	y certify th	at the info	ormation given	above is true ar	d complete to the bes	t of my know	Eafurpri A	D
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proved			• • • • • • • • • • • • • • • • • • • •			Company or Orc	AUG 2 3 19	60
OI	L CONSER	VATION	COMMISSIO	ON	By:	1 Dus	CON. C	OM,
			, 		K. C. MeB	(Signature)	₩ 1817. 3	
Orig	tinal Sign	ed Eme	ery C. Arne	old	Title. Production	n Engineer		
	•. P••	ща			Send Comm	nunications reg	rarding well to	
ileSupe	ervisor Dist.	<i>₩.</i>			Name		was as were	
					2 T CA 5 \$ 5 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

Address......