NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

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° Fahrenheit.

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| /Co | mpany or Or | Prator) | *** | Bolack (Lesse) | ·, W (| ell No | | , in | NUS | .1/414. | 1/4 |
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| Unit La | Ster | *************************************** | * | , | 34.294 | 171. , | | | | • | ro |
| SanJ | uan | ************* | County. E | Date Spudded | 7-28-51 | | Date | Drilling O | capleted | 7-30-5 | 1 |
| Please indicate location: | | | Elevation | 6261 | | Total De | epth | 2063 | PBTD | | |
| | | | Top Oil/Gas | s Pay 1978 | | _Name of | Prod. | Form. | Pictur | ed Cliff | 's |
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| | | Λ | Perforation | ns | | | | | | | |
| E | F G | H | Open Hole | 1978-2063 | | Depth Casing S | shoe | 1 978 | Depth Tubing | 2028 | |
| L | K J | - | OIL WELL TE | <u>-</u> | | | | | | | Ch |
| " | K J | I | Natural Pro | od. Test: | bbls.oi | l, | bb) | s water in | hrs | ,min. | Choke |
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| - • | ing and Cem | | Method of | Testing (pitot, | back press | ure, etc.) | 1 | and the same of | | | |
| Size | Feet | Sax | Test After | Acid or Fractu | re Treatmen | t: | 4950 | MCF | /Day; Hour | s flowed | |
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| 5 1/2" | 1971 | 150 | | acture Treatment | | | terial | s u se d, su | ch as acid | water, oil | , and |
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| emarks: .T | his well | was ori | ginally dr | illed by t | he Front | ier Bei | finir | ig Coe | s. the A | lice Bol | ack |
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| anged t | o the El | Paso Na | turalGas C | o. Alice B | olack No | . 11. | | | / | | 12 |
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| pproved | ••••••••• | ••••••• | | 0, 19 | ********** | • | (Co | mpany or C | perator) | were Zirdi | |
| _f Ol | L CONSE | RVATION | COMMISSI | ION | Ву: | Origina | l- Si gn | ed By: D | H. Oheim- | 1.1%. | |
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| Original Signed Emery C. Arr | | | Dist. # 3 | | I itle | Send C | ommu | inications | | well to: | |
| itle | · | | | | Name | E. S. (| Oberl | У | | | |
| | | | | • | Address | Box 99 | F و 7 | rmingto | il, New | Mexico | |

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