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.

	ONION P	RODUGTIO	IG AN ALLOWA IN COMPANY	icharlson	Well No3	ļ,	in SE	4 SW
			, T. 27-N , F	,	MPM.BARIN	BAKATA		р
Unit Letter	•							
an Juan			County. Date S					
Please indicate location:			769 D.F					
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	1		PRODUCING INTERV	AL 6047-6050,	LOLE LOS	n 40044	400 6404	L4 am
			Perforations	33-6137, 61	1-6145	134-4174	6129-6192	PIZI,
EF	G	H	Open Hole	NONE	Depth Casing St	noe 6284	Depth Brubing	4144 R 1
								
LK	 	I	OIL WELL TEST -					Cho
			Natural Prod. Te	st:bbls	.oil,	bbls water	inhrs,	min. Siz
, .		 _ 	Test After Acid	or Fracture Treat	ment (after r	ecovery of vo	lume of oil equ	al to volume
Me I	0	P	load oil used):_	bbls,oil	,bl	bls water in	hrs,	_min. Size
			GAS WELL TEST -					
75/8-1.	1055/	S.L.			105 /p		Challa.	64
			_	st:				51 Ze
. ,		nting Record		g (pitot, back pr		*		·
Size	Feet	SAR		or Fracture Treat				-
8-5/8	298	220	Choke Size_3/4	Method of Tes	ting: Sime	LE POINT	BACK PRESS	
				Treatment (Give		arials used	euch as acid.	water. Oil. a
-1/2"	6285	1750 00	_					
	44.74		sand):	Tubing	Date first nev	TATER, A	G FORE EU	
	6156			Tubing 1844 Press. 1844				
-1/2"			Oil Transporter_	90% PLATEAU	INC. 105	HEW MEXIC		
-1/2"			Gas Transporter	S: DARR NATH	mai Dán P	TOTAL A SALV		MARIA
-1/2"			Gas Transporter_	SP . WES ISHIF	WEL AND A		/ -	
			Gas Transporter_				///	IATO
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narks: I hereby	· · · · · · · · · · · · · · · · · · ·	at the infor	mation given abo	ve is true and co	omplete to the		NOV.	JYLD 191364
narks:	· · · · · · · · · · · · · · · · · · ·	at the infor		ve is true and co		best of my	NOV.	JYLD 191364
I hereby	certify th	at the infor	mation given abo	ve is true and co	omplete to the	best of my	MOV Ruow edgel C	JYLD 19 364
I hereby	certify the	at the infor	mation given abo	ve is true and co	omplete to the	best of my	knowledgel Co	JYLD 19 364
I hereby Proved	certify the DV 1 9 196 CONSER al Signed KENDR	at the infor	mation given abo	ve is true and co	omplete to the	best of my Company No. Ambign	MOV knowledgell Contractor of auc.	JYLD 19 364
I hereby roved	certify the DV 1 9 196 CONSER al Signed KENDR	at the infor	mation given abo	ve is true and co	omplete to the	best of my LON PRODU Company No. AMSign	MOV in MO	9 364 on. com
I hereby roved	certify the DV 1 9 196 CONSER al Signed KENDR	at the infor	mation given abo	ve is true and co	DENT D. DELLING Send Co	best of my LON PRODU Company No. AMSign	knowledged! Control of Garding with the segarding w	9 364 on. com

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LATED OFFICE

TRANSPORTER

GAS

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