## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fd. New Mexico

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

## REQUEST FOR (GAS) ALLOWABLE

New Well

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.

				Fermington, (Place)	New Mexico	NO <b>VS</b> TI.	(Date)
E ARE H	EREBY RE	QUESTIN	IG AN ALLOWABLE FO	OR A WELL KN Well No	iown as:	in SW	y SE y
. C			(Lesse T 28N , R 9W	` <del>,</del>			
Elman I att	ar .						
San Ju	an.		County. Date Spudded Elevation 5830	10/20/59	Date Drillin	g Completed	אַן עאַ
Please	e indicate lo	cation:	Top Cil/Gas Pay 2082	. oca i	of Prod. Form.	Pictured (	Cliffs
D	В	A	PRODUCING INTERVAL -		_		
E	F G	H	Perforations 2110 - Open Hole	Depth Casir	ng Shoe 2169	Depth Tubing	2128
L	K J	I	OIL WELL TEST - Natural Prod. Test:	bbls.oil,	bbls water	r inhrs,	Choke min. Size_
M	N O	P	Test After Acid or Fract				Choke
	<u> </u>		GAS WELL TEST -				
			Natural Prod. Test:				
•		_	d Method of Testing (pitot				
Size	Feet	SAX	Test After Acid or Fract				flowed
8 5/8	162	100	Choke Size 3/4 Meth				
4 1/2	2169	75	Acid or Fracture Treatme	hea water and	60.000# sen	d	
1	2128		Casing Tubing Press. Press.	Date first oil run to	t new o tanks		
			Gas Transporter Seut	hern Union G	as Company		
emarks:			Ggs 11allapot tos				
I hereb	by certify th	at the info	rmation given above is tr	ue and complete to	o the best of my	knowledge.	
pproved	deservoli	er23	NDV 8 / 1858 , 19.59	. AS VOC. U	CICNED RY	IOE C. SALMO	N
OIL CONSERVATION COMMISSION				By: ORIGINAL SIGNED BY JOE C. SALMON  (Signature)			
			. 1 ( ) 4 ( ) 60°	Title istrict Superintendent Send Communications regarding well to:			
tle Ne			# 9	Name Aste	c (il and Ge	as Company	
				- '	# 7%, Far		ew lexico