

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

REQUEST FOR ALLOWABLE WELL KNOWN AS

New Well
ZINCOPOLYMER

This form shall be submitted by the operator before the well shall be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRE PLICATED to the District Office to which Form C-101 was sent. The allowable will be assigned effective 1:00 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 the date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 100% basis at 500° Fahrenheit.

Paradise, New Mexico

April 14, 1961

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE WELL KNOWN AS

Antec Oil and Gas Company

Bigood

Well No. 25-0

in

1/4

1/4

(Company or Operator)

0

Sec. 19

T. 29N

R. 13W

1/4 PM

Total Gallon

Pool

Unit Letter

San Juan

County, New Mexico

3/26/61

Date Drilling Completed

4/4/61

Please indicate location:

D	C	B	A
E	F	G	H
		X	
L	K	J	I
M	N	O	P

Elevation 5306 O.L.

Total Depth 5163

PBTD

5133

Top Oil/Surface 5720

Name of Prod. Form. Gallup

PRODUCING INTERVAL

Perforations 5024-5188 with 6 shots per ft.

Open Hole

Depth

Casing Shoe

Depth

Tubing 5098

OIL WELL TEST -

Natural Prod. Test: _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of acid oil used): 226 _____ bbls water in 24 hrs, _____ min. Choke Size 20/61

GAS WELL TEST -

Natural prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (nitro back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

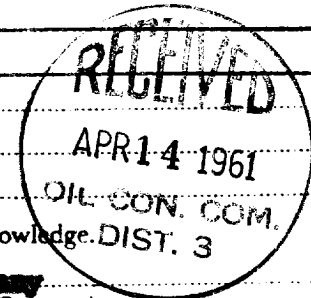
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Fraced with 25,000 gal. acid, 622 bbls. oil, flushed with 78 bbls. oil.

Casing _____ Tubing _____ Blue first new _____ oil. _____ Press. _____ oil run to tanks 4/9/61

Oil Transporter New Mexico Tankers Inc.

Gas Transporter _____

Remarks:



I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3

Approved April 14, 1961 APR 14 1961

Antec Oil and Gas Company

(Company or Operator)
ORIGINAL SIGNED BY JOE C. SALMON

By: _____ (Signature) Joe C. Salmon

By: Original Signed Emery C. Arnold

Title: District Superintendent

Send Communications regarding well to:

Title Supervisor Dist. # 3

Name: Antec Oil and Gas Company

Address: Boxer # 570, Paradise, New Mexico

STATE OF NEW MEXICO	
OIL CONSERVATION COMMISSION	
ALBUQUERQUE DISTRICT OFFICE	
NUMBER OF COPIES RECEIVED	
DATE RECEIVED	
SANTA FE	
P.O.	
U.S.G.S.	
LAND BUREAU	
TRANSPORT R	OIL
PRORATION OFFICE	GAS
OPERATOR	