## 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.

				Hobbe,	ealwox well	Bovember	13, 1957	
				(Place)			(Date)	
			NG AN ALLOWABLE F					
			Al Company, N. N. Fed	leral I Well N	lo <u>1</u>	, in5₩	/4	
(C	ompany or O	perator)	usl) = 200 _ 120	e) !	linden i en	nt.md	<b>.</b> .	
Dat L	Sc	c	T 298 , R 148	, NMPM.,			Pool	
San J	นลภ		County. Date Spudded.	6-21-57	Date Dril	lling Completed	7-11-57	
	se indicate		Elevation 54.99	To	tal Depth	PBT	3510	
			Top Oil/Gas Pay 34	NaNa	me of Prod. Form	. Point Lee	kout	
D	C B	•	PRODUCING INTERVAL -					
			Perforations 3493	- 350 <b>5</b>				
E	F G	H	Open Hole	De Ca	pth sing Shoe 5920	Depth Tubin	g	
*					aling dioe_pr		9	
L	K J	I	OIL WELL TEST -		•		Choke	
	"   "	•	Natural Prod. Test:	bbls.oil, _	bbls wa	ater inhr	s,min. Size	
			Test After Acid or Fract	ture Treatment (a	fter recovery of	f volume of oil	equal to volume of Choke	
M	и о	P	load oil used):	_bbls.oil,	bbls water	inhrs, _	min. Size	
			GAS WELL TEST -					
			Natural Prod. Test:1	3 <b>6</b> 0 no	F/Dav: Hours flo	owed Cho	ke Size	
hibing Co	aing and Co	menting Reco					<del></del>	
Size	Feet	Sax					se flowed	
	1	1	Test After Acid or Fract					
9 5/8	341	250	Choke SizeMeth	nod of Testing:				
	****	200	Acid or Fracture Treatme	ent (Gi <del>ve</del> amounts	of materials us	sed, such as aci	d, water, oil, and	
5 1/2	5920	300						
2 3/8	3502	-	sand):	Date fi	rst new			
- 2,0	1,,,,,		- I Tress.	·		نصر	ACR	
			Oil Transporter			<i>J</i> A	FIFTURN	
			Gas Transporter 10 1			— / N		
lemarks:.			**************************************		******************	1 40	)√ 2 <i>5</i> 19 <b>57</b>	
			***************************************		***************************************	1	CON. COM.	
			***************************************	_		````		
I here	by certify	that the inf	ormation given above is tr	rue and complete	e to the best of the	my knowledge.		
pproved.	VOV	25 1957	, 19	Suiry	Mid-Contier	my or Operator)	0.1	
			,	- C. T			. Clouber	
C	IL CONS	ERVATION	N COMMISSION	Ву:	. McClanahe	Signature)		
Ori	ginal Sig	ined Eme	ery C. Arnold	mu linkh	a Area Sund	rinkendenk		
-			ery C. Arnold	Title Hobbs Area Superintendent  Send Communications regarding well to:				
Title Supervisor Dist. # 3					Sunray Mid-Continent Gil Company			
				Name				
				Address Bo	x 128, Kebi	os, New Hex	.09	

No. Copies	<u> </u>	COMMISSION OFFICE	