

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.

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

BMVS Co Brown, Well No. 2, in SE $\frac{1}{4}$, 29, T. 30N, R. 12W, NMPM, Pool

Unit Letter

County. Date Spudded 8-12-59 Date Drilling Completed 8-16-59

Please indicate location:

Elevation _____ Total Depth 1660 PBD
Top Oil/Gas Pay 1602 Name of Prod. Form. 1660 P.C.I.F.F.

PRODUCING INTERVAL -

Perforations _____

Open Hole _____ Depth _____
Casing Shoe _____ Tubing _____

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

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

Method of Testing (pitot, 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): _____

Casing _____ Tubing _____ Date first new _____

Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter _____

Remarks: Reworked Well - Drilled bridge and bailed hole free of water put it down

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

Approved 11-13, 19 59

OIL CONSERVATION COMMISSION

By: Emmett Arnold

Title Sup. Dist. III

By: [Signature]

(Signature)

Title _____

Send Communications regarding well to:

Name [Signature]

Address Esperanza, Colo



