NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

		(Place)	Manag	ynja 53°	1958 Date)
VE ARE HEREBY REQUES					
(Company or Operator)	······································	denal, Well No	14-3 , in		SV ¹ /.
N Sec. 14	, T. 3011 , R. 11	, NMPM.,	Axtec		Por
(Unit)					
Please indicate location:	County. Date Spudde	ed[2403[, Date Comple	eted7-23-5	7
Flease indicate location:					
	Elevation	Total Dep	oth 2197	, P.B	**********
	Top oil/gas pay	2390 N	ame of Prod.	Form Pleture	l Gliffe
	1	ons: 2399 to 945			
	Depth to Casing	shoe of Prod. String	2 \9 7		
•	Natural Prod. Te	st	•••••	••	BOPI
	based on	bbls. Oil in	1	Hrs	Mins
	Test after acid or	shot			B OPI
Casing and Comenting Reco	Rosed on	bbls. Oil in	1	Hrs	Mins
9 5/8 100.25 100	Gas Well Potenti	al 4311			······································
7" 2497.11 75 cu.	Size choke in inc	hes 3/	an .		••••••
D" PAST		to tanks or gas to Trai	nsmission system:	:	
	Transporter takin	g Oil or Gas:	seo Michael		
		.8 0.1 0.1 0		/ ATTEN	
emarks:					fn/
	······································			24.5	<u>. 7.</u> 27
· · · · · · · · · · · · · · · · · · ·				OIL CON. CI	m Å
I hereby certify that the is	nformation given above is	true and complete to t	he best of my kn	o dedge 187, 8	
pproved	,, 19	PURCO PA	(Company or	Operator)	
OIL CONSERVATIO	N COMMISSION	By:	1 Makul		
OIL CONSERVATION	ON COMMISSION	Бу;	Signati	rell. R. Maxie	ll, Jr.
Original Signed En	nery C. Arnold	Title	T. Prod. De	pt	
tle Supervisor Dist. # 3	3	Send (Communications	regarding well to):
HV		Name	Maxwell, JR	.	
		Address 106	Mast Sheet		***

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