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.

				Farmington	, New M	exico I	ecembe	_
E AOF I	JEDEDV D	FOURTIN	NC AN ALLOWADIE	(Place)	NOWN A	•		(Date)
			NG AN ALLOWABLE				NTEP	. NTOV
(0	mpany or Ub	erator }	Co, Herseshoe Ca	esse)				•
C	Sec	4	, T. 30N , R 16	W, NMPM.,	Undesi	gnated	•••••	Po
UNIX LA								_
San Ju	a n		County. Date Spudde	d 9-12-57	Date I	brilling Co	pleted	9-18-57
Pleas	se indicate l	ocation:	Elevation 5316					CO 1261
D ,	C B	A	Top Oil/Gas Pay 110	Name	of Prod. 1	FormG	anab	
	K		PRODUCING INTERVAL -					
-	P 0	+	Perforations 1108					
E	F G	H	Open Hole	Dept Casi	th ing Shoe	1286	Depth Tubina	1260
			OIL WELL TEST -				<u> </u>	
L	K J	I						Choke
			Natural Prod. Test:					
M	N O	P	Test After Acid or Fra					and the second s
<i>"</i>	" "		load oil used): 111	bbls,oil, 0	bbls wa	ter in <u>24</u>	_hrs,	_min. Size_2"
			GAS WELL TEST -					
00'/N,	36001/E		Natural Prod. Test:	105	/n			
Mac Co.	ing and Com	ntine Person	_					Size
Size	Feet	Sax	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	1 		Test After Acid or Fra	cture Treatment:		MCF/I	Day; Hours	flowed
5/8"	116	100	Choke SizeMe	thod of Testing:				·
	1070	100	And Anna Providence Transaction		6			
5 1/2"	1279	100	Acid or Fracture Treats	•	i materials	usea, such	as acio,	water, oii, and
2"	1255		sand): 200 gal	Date firs	t new			
	1233		Casing Tubing Press Press	oil run t	o tanks		<u></u>	
			Oil Transporter El P	aso Natural Gar	s Product	s Comps	TOP	
			Gas Transporter	None			2tl tl	
marks:	••••••	************			************		arrit'i	Arn / T
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01	T CONSTR	NATION.	001/1/101/01/		<. C.S	-0.10 5		
OI	L CONSER	CVATION	COMMISSION	Ву:	<u> </u>	Signature)	
Orig	ginal Sign	ed Emer	W C. A	Par Par	troleum	Engineer	•	
y: Original Signed Emery C. Arnold Supervisor Dist. # 3				Title Sen	••••••	nications re		rell to:
	Subetaisor -							
				NameEy	vell N. V	/alsh		
				AddressP.	O. Box 1	5 65 ; Far	mington	. Nw. Mex.

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OIL CONSERVATION COMMISSION

AZTEC DISTRICT OFFICE

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