## 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) Colorad	9.=	24-59(Date)
WE ARE HER	REBY RE	QUESTI	NG AN ALLOWABLE FO	OR A WELL KNOWN AS:		
Conso (Compa	lidated ny or Ope	Oil & (	Gas, Inc. Gov!t Sent (Leac	er, Well No1	, in <u>s.e</u>	¼S.W¼,
N	, Sec	24	., T31N R13.W. Deepeni	, NMPM.,Blanco		Pool
San Juan				8-30-59 Date Dril	ling Completed	9-23-59
	ndicate lo			BTotal Depth_678		
		<del></del>		Name of Prod. Form		
D C	В	<b>A</b>	PRODUCING INTERVAL -			
	+ -		Perforations 6612-37	6641-47, 6655-61', 6	670 <u>-</u> 861, 669	4-67121
EF	G	H	Open Hole None	Depth Casing Shoe 67	Depth Tubing	6460
	ļ		OIL WELL TEST -			
L K	J	I	<del></del>	bbls.oil,bbls wa	ater in hrs	Choke
				re Treatment (after recovery of		
M×N	0	P		bbls.oil,bbls water		Choke
			GAS WELL TEST -	· · · · · · · · · · · · · · · · · · ·	<del></del>	
				MCF/Day; Hours flo	nwad -3-4- Chok	. Sizo
Tubing Casing	and Come:	nting Recor		back pressure, etc.):		- 512e
Size	Feet	Sax		re Treatment: 2500		flowed 9.4
				od of Testing: <b>Initial to atr</b>		
10 3/4"	214	<u>225</u> 50 W/	-			
7"	4004 I	% gel	Acid or Fracture Treatmen	t (G <del>ive</del> amounts of materials us	ed, such as acid,	water, oil, and
4.1/2			Casing Tubing	36.000# - 66.000 g		
		175	7	000 oil run to tanks Awa		* * * * * * * * * * * * * * * * * * * *
	800	-	Cil Transporter Four	States Western		FHH-
	•		Gas Transporter South	ern Union Gas Compa	my / Kt	PFIXTR /
temarks:(	OldM	82V.67	ge-west sign-secousi	veren as duar Dakota-	Mesa Verde	P281959
	••••••	•••••••••••••				CON COM
I hereby c	ertify the	t the info	rmation given above is tru	e and complete to the best of n		DIST. 3
i neteby c	ciuly ul	<b>SEP</b> 2.8				11
.pp.oved	••••••	•••••••		CONSOLIDATED	ny or Operator)	, IIIO.
OIL (	CONSER	VATION	COMMISSION	By 15 /a		
Origin	al Sign	ed Eme	ery C. Arnold	J)B.Ladd	Signature) Vice	resident
y:Ongii	•••••			TitleSend Communica	ations regarding	well to:
itle	Supe	ervisor Dis	t. # 3			
				Name.Consolidated.C	_	
			•	Room 312, 174 Address.Denver 2, G	otorado	

and Albertain		• • •	y <del>-</del>			
		:	OIL CONSERVATION COMMISSION			
	AZTEC DISTRICT OFFIC					
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