## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Ravised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

31.

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.

F ARF H				•	Place)			(Date)
TEXACC	Inc.	Azte	ng an allowae Re- <b>Navajo "A</b> '	·····, '			NM	1/4 NE
(Com	pany or Ope	rator)		(Lease)				
Unit Leth	, Sec er	KJ	., T <b>32N</b> , R.	, NN	IPM., WING	PTRUBLEC	Garrin	PP
			County. Date Spi	udded 11-8	-61 Total Dep	th 1120	Completed PBTD	11-11-61
Please	indicate lo	cauon:	Top Oil/Gas Pay					
D C	B •	A	PRODUCING INTERVAL					
E F	P G.	Н	Perforations Open Hole 1045		Danth	oe 1045	Depth Tubing	1113'
L K	J	I	OIL WELL TEST - Natural Prod. Test	bbls.	oil,	bbls water i	n —— hrs,	Cho
M N	0	P	Test After Acid on	,				
		لبا	GAS WELL TEST -					
	<del> </del>		Natural Prod. Test	. 1 <u>##= q#</u>	MCF/Day;	Hours flowed _	Choke	Size
•	ng and Cemen	_	<b>d</b> Method of Testing	(pitot, back pre	ssure, etc.):			
Size	Feet	Sax	Test After Acid or	Fracture Treatm	ent:	MC	F/Day; Hours	flowed
-1/2"	101	50	Choke Size	Method of Test	ing:			
-1/2"	1045	100	Acid or Fracture T					
								P BALLO
-3/8"	11131		Press.	resso	il run to tan	ks	.6-61	
			Cil Transporter	ACROOG	COPPORT	ion		
	1							
			Gas Transporter	Mone			-/0	THA
narks:			Gas Transporter		·		RI	HVE.
narks:					·		R	£{V£}; 28 1961
							1012	28 1961
I hereby	certify tha	t the info	rmation given above	e is true and cor		best of my kn	1012	229 1951 CON. COM UST. 3
I hereby	certify tha	t the info		e is true and cor	nplete to the	best of my kn	owledge.	28 1961 CON. COM UST. 3
I hereby	certify tha	t the info	rmation given above 2 9 1961 , 1	e is true and cor	nplete to the	best of my kn	owledge.	29 1961 CON. COMPLET. 3
I hereby	certify tha	t the info	COMMISSION	e is true and cor	nplete to the	best of my kn	owledge. D	29 1961 CON. COM UST. 3
I hereby proved	certify tha	t the info	COMMISSION	e is true and cor	nplete to the	best of my kn  Inc.  (Company or	owledge. C	CON. COM
I hereby proved	certify that CONSER' Original S A. R. KE	t the info DEC VATION Signed By CNDRICK	COMMISSION	e is true and cor 9 By:	nplete to the	best of my kn  Ine.  (Company or	owledge. Doperator)	CON. COMPIST. 3
I hereby proved	certify that CONSER' Original S A. R. KE	t the info DEC VATION Signed By CNDRICK	COMMISSION	By:	nplete to the	best of my kn  Inc.  (Company or  (Signature)  (Signature)  (Signature)  (Signature)	owledge. Doperator)	CON. COM DIST. 3

STATE OF NEW MEXICO
DIL CONSTRUCTION COMMISSION

MADER OF COPIES RECEIVED

DISTRICT OFFICE

STATE OF THE TOTAL TOTAL

STATE OFFICE

TRANSPORTER GAS

PROMATION OFFICE

OPERATOR