(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.

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_	.oil.	k .Gas	Compan		ner "B"	A WELL KNO			.8k ;	/ 4\$\)
		_	29	, T 173	(Lease)	, NMPM., 6	reliper	g-Jacka	DA	
244	.			County. Da	ate Spudd	-60	Date I	brilling Co	mpleted	6-27-60
	ase indi					Total				3703
<u> </u>	<u> </u>	В		Top Oil/Gas	Pay 3176	Name o	f Prod. 1	Form. C	replace.	
D	C	D	A	PRODUCING I	NTERVAL -					
				Perforation	·	22_3544				
E	F	G	H			Depth Casing	Shoe	3704	Depth Tubing	34.63
										_4730
L	K	J	I	OIL WELL TE						Chi
				Natural Pro	d. Test:	bbls.oil,	bb1	s water in	hrs,	min. Si
				Test After	Acid or Fracture	Treatment (after	recover	y of volume	of oil equ	aal to volume
M	И	0	P	load oil us	ed): <u>189</u> bb	ols,oil,	_bbls wa	ter in2	hrs,	_min Size
	X		1	GAS WELL TE	ST -					
		440.	<u> </u>		-	,				
9001_1			•		d. Test:	MCF/Da	y; Hours	flowed	Choke	Si ze
			ting Recor	d Method of T	esting (pitot, b	ack pressure, etc):		····	
Size	F	ret	Sax	Test After	Acid or Fracture	Treatment:		MCF/	Day; Hours	flowed
	1_			Choke Size_	Method	of Testing:				
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Lá.	370	4	125	Acid or Frac	cture Treatment	(Gi ve amounts of	materials	used, suc	h as acid,	water, oil, a
	7/1	•	462	sand):20_0	00 gal & 20	Lebres \$000,) free	- 250 g	al break	dena acid
2 3/0	348	L	tubing	i casing	ranting	Date first oil run to	116 M			
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	-			Gas Transpor	rter	Oll Company				
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		•••••						• • • • • • • • • • • • • • • • • • • •		
I here	eby cert	ify tha	t the info	rmation given	above is true	and complete to	the best	of my know	wledge.	
	-	-		<u> </u>			air oi	1.4.Gas	.Company	<u> </u>
Protoci		J UL	∑ (150)	•	,	. -/	(Ćor	npany or O	perator)	
C	ii. co	NSER	VATION	COMMISSI	ON	By	7	/) 	6.27	
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NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

Hdrm G-110 Revised 7/1/55

(File the original and 4 copies with the appropriate district office itsia; defile

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company or Operator	SINGLAIR OIL & GAS COM	PANY Lease_	Turner "B"
Well No. 66 U	nit Letter I S 29 T	178 R 31E Pool Graybu	rg-Jacksen Peol
County Bidy	Kind of Lease	(State, Fed. or Patente	d) was
If well produces oil o	r condensate, give locati		
	er of Oil or Condensate	-	
Address	ress to which approved	Box 1510, Midland, Tex	A.0
(Give add	ress to which approved	copy of this form is to b	e sent)
	er of Gas Shelly Oil 6		
Address	Best 1650, Tu	lsa, Okla, Date Conn	ected 7-5-60
(Give add	ress to which approved	copy of this form is to b	e sent)
ii dan to not being so	ld, give reasons and also	s explain its present dis	position;
Reasons for Filing:(P	lease check proper box)	New Well	(X)
	r of (Check One): Oil (· ************************************	· · · · · · · · · · · · · · · · · · ·
Change in Ownership_	()	Other	
Remarks:		Give explan	ation below)
	e de la companya de		
	fies that the Rules and R	legulations of the Oil Co	onservation Com-
mission have been con	nplied with.		
Executed this the 18	day of Fir l	9 60	> 1
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		Ву	(Jac) 1100
Approved	19	Title Dist. Supt.	
• • • • • • • • • • • • • • • • • • • •			
OIL CONSERVA	TION COMMISSION	Company Sinclair Of	1 & Gas Company
By ML armil	rong	Address 520 E Broad	way, Hebbs, N.H.
Title #11 FF FAS IRSEE	CTOR		
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