RECEIVED

NEW .EXICO OIL CONSERVATION COMM. SION Santa Fe, New Merice 4 1960 RECEIV Land 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE SEP 2.6 196 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

			-	(Place) (Date)
				R A WELL KNOWN AS:
				<u>d</u> , Well No
(Co	ompany or Op	erator) 97	(Lease) T 108 D 258	, NMPM., South Bitter Lake, San Andres Pool
Unit L			., T AV. R	, NMPM.,
C	haves		County, Date Spudded	7-6-60 Date Drilling Completed 7-21-60
			Elevation 3485	
Please indicate location:			Top Oil/Gas Pav	Total Depth908 PBTDName of Prod. Form. Sen Andres
	C B	A	PRODUCING INTERVAL - Perforations 895	
	x	r.	RQ 5	4 904
		H	Perforations	Depth Depth
	F G		Open Hole	Depth Depth Casing Shoe 906 Tubing
			OIL WELL TEST -	
L .	KJ	I	and the second se	Choke
				bbls.oil,bbls water inhrs,min. Size
				re Treatment (after recovery of volume of oil equal to volume of Choke
(] .	N O	Р	load oil used): 38	bbls,oil, 25 bbls water in 24 hrs, min. Size 2"
			GAS WELL TEST -	
	60 N. 1	95011		
_	• •	•		MCF/Day; Hours flowedChoke Size
	sing and Cem		Method of Testing (pitot,	back pressure, etc.):
Size	Feet	Sax	Test After Acid or Fractur	re Treatment:MCF/Day; Hours flowed
7 "	692	210	Choke SizeMethod	d of Testing:
4 1 "	906	50		Give amounts of materials used, such as acid, water, oil, and
	-		sand): 5 Barrels acid	, 10000 gal Lease Crude and 11600 # Sand.
		l	Press. Press.	O Date first new oil run to tanks September 20, 1960
		1	Oil Transporter	Mc Wood Corp.
			Gas Iransporter	
n arks:		<u> </u>		
•••••				
••••••		hat the info	ormation given above is true	e and complete to the best of my knowledge.
I here	by certify t			T. T. Ma Asama - WTAT
	by certify t		. 19.99	J. F. Mc Adams - KTAL
	by certify t	1950	September 19.60	(Company or Operator)
oroved	0CT 4	1950		
proved	0CT 4	1950	COMMISSION	(Company or Operator) By: JM Ullaure (Signature)
proved.	0CT 4	1950		(Company or Operator) By:
proved.	OCT 4 DIL CONSE	1950 RVATION Matree	COMMISSION	(Company or Operator) By: (Signature) Title Send Communications regarding well to:
oroved	OCT 4 DIL CONSE	1950	COMMISSION	(Company or Operator) By:
proved	OCT 4 DIL CONSE	1950 RVATION Matree	COMMISSION	(Company or Operator) By: (Signature) Title Send Communications regarding well to: