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

RECEIVED REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recompletion

This form challed submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form 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 completions. 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.

				Roswell, N.M. Nov. 20, 1961 (Place)
			-	ING AN ALLOWABLE FOR A WELL KNOWN AS:
re	(Company	y or Ope	rator)	O. Dale Fed., Well No. 1, in. SW 1/4, NW 1/4, (Lesse)
E Unit	t Latter	, Sec	.33	T7S, R26E, NMPM.,Wildcat
• · · • • • • • • • • • • • • • • • • •	Cha	ves	********	County. Date Spudded 10-15-61 Date Drilling Completed 10-29-61
F	Please inc	licate lo	station:	
D	С	В	A	Top Oil/Gas Pay 1128 Name of Prod. Form. San Andres
		•		PRODUCING INTERVAL -
				Perforations 1128-1134; 1140-1146; 1154-1160
E	F	G.	H	Depth Depth Open Hole Casing Shoe Tubing
x				OIL WELL TEST -
L	K	j	1	Chake
			1	Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size
M	N	0	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke
	21			load oil used): 15 bbls.oil,bbls water in 24 hrs,min. Size
			اللل	GAS WELL TEST -
_//	<u>. 52.</u>	<u> - 35 :</u>		Natural Prod. Test: TSTM MCF/Day; Hours flowed Choke Size
Lubing	Casing a	nd Cemer	ting Recor	Method of Testing (pitot, back pressure, etc.):
Sin	· 1	Feet	Sax	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
				Choke Size Method of Testing:
8-5	/8 1	02	circ.	cloke Size Method of Testing:
	İ			Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
4-2	- 1	170	circ	T sand): ACIC
				Casing Tubing Date first new 10-29-61 Press. Press. oil run to tanks 10-29-61
			···	MONOrd
	ļ	l		
				Gas Transporter
Kemark	5 :	• • • • • • • • • • • • • • • • • • • •		
		•••••••	************	······································
ть	ereby car	ifar •ha	 • •he info	ormation given above is true and complete to the best of my knowledge.
	JON Co.	/"2 T"		= 1 = 1 = 1 = 1
Approve	:a	**********		, 19
		MCED	VATTON	COMMISSION By: 71 Toff
1	~ ~		- LION	M.W.Coll (Signature)
iv· /	111 F 1	Prin	Trong	Title Agent
- , 				Send Communications regarding well to:
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				Address Roswell, N.M.

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