## NL , MEXICO OIL CONSERVATION CON... AISSIGN Santa Fe, New Mexico AUG 1 4 1959 seed 7/1/57 QUEST FOR (OIL) - (GAS) ALLOWARE

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

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.

					Artesia, We	w Mexico	8/4/59 (Date)
E ARI	E_HER	EBY RE	QUESTI	NG AN ALLOWABLE FO	OR A WELL KNOW	N AS:	. ,
yn.	J. S	pears	, Ind.	April 2 State	, Well No	, in.	
C	C Sec. 28			, T. 11 S., R. 27	NMPM, Coyote-Queen lenging Po		
				County. Date Spudded.	7/14/59 I	ate Drilling (	Completed 7/17/59
		dicate lo		Elevation 3724 DB	Total Dep	th_ <b>922</b>	PBTD
D	C	C B	A	Top Oil/Gas Pay 840	Name of P	rod. Form.	GROOM
		~		PRODUCING INTERVAL -			
E	F	G	H	Perforations 840-4	8, 859-74 Depth		Depth
	F	4	"	Open Hole	Casing Sh	oe <b>922</b>	Tubing 830
	77		╀╼┥	OIL WELL TEST -			Chok
L	K	J	I	Natural Prod. Test:	bbls.oil,	bbls water i	nhrs,min. Size
							me of oil equal to volume of
M	N	0	P	load oil used): 40	bbls.oil, 0 bb	ls water in <u>2</u>	hrs, min. Size
				GAS WELL TEST -			
660N + 1180W				Natural Prod. Test:	MCF/Day;	Hours flowed _	Choke Size
ıbing ,	,Casing	and Cemer	nting Reco	rd Method of Testing (pitot	, back pressure, etc.):		
Size	•	Feet Sax		Test After Acid or Fract	ure Treatment:	MC	F/Day; Hours flowed
41		00	150	Choke SizeMeth	od of Testing:	·	
4	-   7	22		haid on Exacture Treatmet	ot (Give amounts of mate	erials used, su	uch as acid, water, oil, an
				27000	ack oil & 100	000 # S	and
				Casing Press. 100 Press.	Date first new	ks 8/1/	'RO
							ctus Petroleum
				<u></u>			
	<del> </del>			Gas Transporter			
mark	<b>3</b> i		•	**************************************			***************************************
		·••••••	• • • • • • • • • • • • • • • • • • • •				•
T h	erehu c	ertify the	at the info	ormation given above is tr	ue and complete to the	best of my kn	owledge.
prove		8/4		1.7.1259, 19 <b>59</b>		Spears	
pprove					0 (	(Company or	Operator)
OIL CONSERVATION COMMISSION					Ву:	Signal	Iman
`	mi		, <i>†</i>		Comen144	ne dest-	ariat
y: III Limilroug					Title Consulting Geologist  Send Communications regarding well to:		
tle OIL AND GAS INSPET				P/702			
					Name A. D. J		
					Address	rper Bld	g. Artesia, W.