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

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

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

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.

Dr / Sem  (Comp  M  Unit Letter Chaves  Please  D C  E F  L K  Mo N	indicate loca	( <b>)</b> 33	England Rader	(Place) OR A WELL KNOWN AS:  Well No	Nov. 21, 1964 (Date)  SW SW 4,  rings -SAN Andres Pool
Dr / Sem  (Comp  M  Unit Letter Chaves  Please  D C  E F  L K  Mo N	indicate loca	ation:	England (Less , T. 6 S , R 26 E	Well No	rings -SAN Andres Pool
Dr / Sem  (Comp  M  Unit Letter Chaves  Please  D C  E F  L K  Mo N	indicate loca	ation:	England (Less , T. 6 S , R 26 E	Well No	rings -SAN Andres Pool
M Comp  Unit Latter Chaves  Please  D C  E F  L K  Mo N	indicate loca	ation:	, T, R, R	NMPM., Leslie Spi	rings -SAN Andres Pool
Please D C E F L K	indicate loca	ation:			
E F L K Mo N	B	ation:	County. Date Spudded.  Elevation  Top Oil/Gas Pay	NA Total Depth 1	143
E F L K Mo N	B	ation:	Top Oil/Gas Pay	993	
E F L K Mo N	B	A	Top Oil/Gas Pay	// Name of Dood Come	Slaughter San Andres
L K Mo N	G	}		Name of Prod. Form	
L K Mo N	G		PRODUCING INTERVAL -	06 1.006.006	
L K Mo N	G			96 and 1006-1016	6 Depth 1006
M <sub>o</sub> N		H	Open Hole	Depth Casing Shoe 1046	6 Depth 1026 Tubing
M <sub>o</sub> N		•	OIL WELL TEST -		<del></del>
990' FS	J	I	<del></del>		Choke
990' FS			<u></u>		ater inhrs,min. Size
990' FS	<del>                                     </del>	<del></del>	Test After Acid or Fract	ure Treatment (after recovery of	f volume of oil equal to volume of Choke was
	0	P	load oil used):8	_bbls.oil,bbls water	in 24 hrs, min. Size
		I	GAS WELL TEST -		F aF
	1/990'FWL	- 1		ump/p U. El.	Challe Cine
(	OTAGE)				owedChoke Size
ubing ,Casin	ng and Cement		Method of Testing (pitot	, back pressure, etc.):	<del></del>
Size	Feet	Sax	Test After Acid or Fract	ure Treatment:	MCF/Day; Hours flowed
8-5/8"	1001	Circ	Choke SizeMeth	od cf Testing:	
0-2/0	100	0110			
4-1/2"	1046	75	Acid or F500 wre Treatme	10% ac i mount 2000# of 20	sed, such as acid, water, oil, and -40 <b>sand</b>
2"	1026		Press. Press.	Date first new oil run to tanks	12-64
			Oil Transporter	ood Corporation	RECEIVED
			Gas Transporter		
			Gas ITanapot tet		NOV 2 5 1964
emarks:					
••		· · · · · · · · · · · · · · · · · · ·	••••••		O. C. C.
	••••••				
I hereby	certify that	the infor	rmation given above is tr	ue and complete to the best of t	my knowledge.
pproved		197 - 18 <b>1</b> 1	19 <b>, 19</b>	Dr. Jan u. Di	<u>unn</u>
				/ /	any or Operator)
OIL	CONSERV	ATION	COMMISSION	By: Pat Sh	empson
\.		-1		()	Signature)
,, <i>/</i> ).		extre	Us	. TitleAgent	11
	IL (Ini		1	Send Communic	ations regarding well to:
tle	ILClm		$\Delta$	11 D. 1 Ti	
	ULLINA	MANAGA A	7	Name Mrs. Pat The Address Box 452, Ar	omspon
tle		extre	ug	TitleAgent Send Communic	cations regarding well to: