## \* MEXICO OIL CONSERVATION CC **NASSION**

Santa Fe, New Mexico

Revised 7/1/57

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

New Well D. C. Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed one of 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.

Robe	rt G. He	inagan	ng an allowabl Graridge-	roceral, \	Well No1	. <b></b> , in	NW	½SB½,
			, T. <b>-17-S</b> , R. <b>-</b> .		Colver Ward	ackson A	bo	Pool
Unit	Letter							
· · · · · · · · · · · · · · · · · · ·	Edd	iy	County. Date Spud					
P	Please indicat	te location:	Elevation 3677  Top Oil/Gas Pay					
D	C	ВА	· · · · · · · · · · · · · · · · · · ·		NSWE OI HE	od. Form.	ADO	
	.		PRODUCING INTERVAL -		·			
E	F	G H	Perforations_		Denth		Depth	-
		<b>"</b>   "	Open Hole		Casing Sho	e 6994	Tubing_	6962
			OIL WELL TEST -					
L	K	JII	Natural Prod. Test:	bbls.	oil,	_bbls water in	hrs,	Choke min. Size
	3	K	Test After Acid or F					
M	N	0 P	load oil used): 9	6bbls.oil,	no bbl	s water in _2	<b>L</b> hrs,	Choke min. Size 12/6
			GAS WELL TEST -					
165	0/8	23/0/8	Natural Prod. Test:		105/D . !!	- 61 1	Ch -1 -	. Cima
Tubing Casing and Cementing Recor			_					
Tubing Size	_	_						
			Test After Acid or I					
8 5/8" 1415 250		Choke Size	_Method of Test	ing:				
			Acid or Fracture Tre	eatment (Give an	rounts of mate	rials used, su	ch as acid,	water, oil, and
41,	<u>/2" 6997</u>	900	sand): A/500	NE		<i>i</i> -	<u> </u>	
	-			•	ate first new	s April	6. 196	3
2	6962	-	Oil Transporter					
			Gas Transporter		-			
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cemark	<b>3</b> í	••••••						J
		•••••						₩.
					minlete to the l	hest of my kno	wledge.	$\sim$ 0
I h	ereby certify	that the info	ormation given above	is true and coi	Robert G	Hanace	n.	
Approve	ed	P12	3, 19.	••••••		(Company or C	Operator)	
	OIL COM	CEDVATION	COMMISSION	R <sub>v</sub> ·	Robert	B. Han	163a-	
		,	COMMISSION	<b>D</b> y	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Signatu	re)	
<b>t.</b>	ML (1:	miller	119	Title.				
'y • ••••≠	SOLDER ALL MAN	ear ingresit			Send Cor	nmunications	regarding	well to:
ſitle	PL ARB	SAG INSERVE	7-	Name	Roba	G. Ha	nagan	
				Addr	ess Does	all New	#.I	