NTA FE	OP -S RECEIVED		NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104) Santa Fe, New Mex					
LE .S.3.5. _AND OFFICE	<u>.</u>		REQUEST FOI	R (GAS) - (GAS)	ALLOWABI	F RE_ENDER		
TRANSPORTE	R GAS		~		S OFFICE O. C. C.	SECONA		
PRORATION O						Recompletion		
Form C- able will month o	104 is to be su be assigned e f completion	ibmitted in Q ffective 7:00 or recomplet	the operator before an initial UADRUPLICATE to the A.M. on date of completion of The completion date be reported on 15.025 psize	same District Office to w on or recompletion, provi shall be that date in the at 60° Fahrenheit.	hich Form C-101 w ided this form is fil- case of an oil well w	as sent. The allow- ed during calendar hen new oil is deliv-		
				Hobbs, New Mexic	co March	(Date)		
WE AR	E HEREBY I	REQUESTIN	G AN ALLOWABLE FO		AS:	(2212)		
			1.1 MA 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1/4 NB 1/4,		
	(Company or O	perator)	(Lease) 	Indesign	ated San Andre	a Gas		
Unit	Letter	C	T. 9-S R 35-1	, NMPM.,		Pool		
Lo	A		County. Date Spudded	3-12-64 Date	Drilling Completed	3-24-64		
P	lease indicate	location:	Elevation 4122 RDB		9613' PBT	D49001		
			Top Oil/Gas Pay 4810	Name of Prod.	Form. San Andr	***		
D	СВ	A	PRODUCING INTERVAL -					
			Perforations 4810-4	820' W/ 2 SPP				
E	F G	H	Open Hole	Denth	9570 Depth Tubir			
			OIL WELL TEST -			·		
L	K J	I	Natural Prod. Test:	bbls.oil, bb	ols water in h	Choke S, min. Size		
			Test After Acid or Fractu					
М	N O	Р	load oil used):	bbls.oil,bbls w	water in'hrs,	Choke min. Size		
			GAS WELL TEST -					
19801		Lines	Natural Prod. Test:	MCE/Day: Hour	rs flowed Cho	ke Size		
tubing	(FODTAGE) Casing and Cen	menting Record						
Sure		Sax	Test After Acid or Fractu		MCF/Day; Hou	urs flowed 24		
20.01		100	Choke Size Various etho					
10-3/	4 440	400 Top at						
7-5/		Top at 351	Acid or Fracture Treatment sand):	(Give amounts of materia	ls used, such as aci	d, water, oil, and		
5-1/	2 I 95701	1450	Casing Person Tubing Press. Press.	90 Date first new oil run to tanks				
2-3/	8" 4691		Gil Transporter Mone					
		<u>]</u>	Gas Transporter Sincl					
Remarks	5 :	•••••						
· • • • • • • • • • • • • • • • • • • •		••••••••••••	•••••	•••••••••••••••••••••••••••••••••••••••	• • • • • • • • • • • • • • • • • • • •			
Ih	ereby certify '	hat the infor	mation given above is tru	e and complete to the bes	t of my knowledge.			
Approve	d		, 19		ompany or Operator)	WI GVIUR		
	~~ <i>6</i> ~~~~		001/165103	Original Sig By: V. E. STAI	ned he			
	OIL CONSE	ERVATION	COMMISSION	Dy:	(Signature)	•••••••••••••••••••••••••••••••••••••••		
By:	75			TitleArea Super	intendent			
Jy	ίλ <i>ωί</i>		•••••	Send Comm	unications regarding	g well to:		

Dy:	<i></i>	 •••••	•••••	•••••	•••••••••••
Title		 e e e			

Name. V. E. Stalay

Address Box 68 - Hobbs, New Mexico