## NEW M IICO OIL CONSERVATION COMMIL ON Santa Fe, New Mexico

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

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

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 ignt. 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.

			Denver City, Texas March 23, 1959 (Place)
WE ARE	HEREBY RI	EQUESTI	(Date) (TING AN ALLOWABLE FOR A WELL KNOWN AS:
The At	lantis Ro	fining (	Company B. Love (Federal)Well No, in SE 1/4 SW 1/4
Unit L		8	(Lease) , T
Roo	povelt		County. Date Spudded 11-15-58 Date Drilling Completed 1-21-59
	se indicate lo		Elevation 1134 Total Depth 10,000 PBTD 1891
D	C B	A	Top Oil/Gas Pay 1852 Name of Prod. Form. Sen Andres
			PRODUCING INTERVAL -
E	F G	H	Perforations 1852-81
		-	Open Hole Casing Shoe 673.18 Depth Tubing 4816.04
L	KJ	I	OIL WELL TEST -
			Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size
M	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
Í			load oil used): 15 bbls, oil, 60 bbls water in 2k hrs, 0 min. 44 12/11
		<u> </u>	GAS WELL TEST -
		<del></del>	Natural Prod. Test: MCF/Day; Hours flowed Choke Size
•	ing and Gemer		Method of Testing (pitot, back pressure, etc.):
Size	Feet	Sax	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
13-3/8	385.77	385	Choke Size Method of Testing:
10			Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
9-5/0	1522.79	1800	sand): 26,000 gals, seid & 10,000# Ottown Sand
5-1/2	673.18	225	Casing Tubing Date first new
			Oil Transporter Castus Petroleum Gorp - Trucks
2-1/2	4816,04		Gas Transporter None
Remarks:	No. fact.	lition.	in the immediate area for the transportation of gas.
••••••	••••••	••••••	
	•••••••••••	•••••	
			ormation given above is true and complete to the best of my knowledge.
Approved	<u> </u>	n 29, 1	1959 , 19 The Atlantic Refining Company (Company or Operator)
OI	L CONSER	VATION	N COMMISSION By: (Signature)
kr:	1, 1,	(M)	Title District Superintendent
			Send Communications regarding well to:
itle		***************************************	NameThe Atlantic Refining Company
			A TOTAL TOTA