NO. OF COPIES REC	EIVED	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
FRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OF	ICE	
Operator		

## NEW MEXICO OIL CONSERVATION COMMISSION

1	REQL	JEST FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE U.S.G.S.		AND	Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO	TRANSPORT OIL AND NATURAL GA	S
TRANSPORTER OIL			
GAS			
OPERATOR OFFICE			
I. PRORATION OFFICE Operator	1		
FIR Charles			
Address			
Reason(s) for filing (Check proper	<b>X</b> 340		
New Well	Change in Transporter of:	Other (Please explain)	
Recompletion		Dry Gas	
Change in Ownership	Casinghead Gas	Condensate	
If change of ownership give nam			
and address of previous owner _		a Sonen, samo uliiruus	
H DESCRIPTION OF WELL AS	ND TEACE		
II. DESCRIPTION OF WELL AN		ool Name, Including Formation	Kind of Lease
Location	in .	Allison Fran	State, Federal or Fee
Unit Letter;;	699 Feet From The	Line and The Feet From The	e
Line of Section	Township (% Rang	e 570, , nmpm, 80088	County
die.		- 12 % And	J. St. St.
III. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURA		
Name of Authorized Transporter of	:: 2	Address (Give address to which approved	
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to which approved	d copy of this form is to be sent)
The grantine with	5.9	30x 272, 0502	
If well produces oil or liquids,	Unit Sec. Twp. Ro	ge. Is gas actually connected? When	
give location of tanks.	1 1 1 20 1 00 1 5	7E 308 1 3	2/3/66
	with that from any other lease or	pool, give commingling order number:	
IV. COMPLETION DATA	Oil Well Gas V	Well New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Compl	etion = (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
			The base of the same of the sa
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
1			
	TUBING, CASING	, AND CEMENTING RECORD	
HOLE SIZE	TUBING, CASING & TUBING SIZE		SACKS CEMENT
HOLE SIZE	1		SACKS CEMENT
HOLE SIZE	1		SACKS CEMENT
HOLE SIZE	1		SACKS CEMENT
V. TEST DATA AND REQUEST	CASING & TUBING SIZ	E DEPTH SET  st be after recovery of total volume of load oil an	
V. TEST DATA AND REQUEST	CASING & TUBING SIZE  FOR ALLOWABLE (Test mus able for the state)	E DEPTH SET  St be after recovery of total volume of load oil an this depth or be for full 24 hours)	d must be equal to or exceed top allow-
V. TEST DATA AND REQUEST	CASING & TUBING SIZ	E DEPTH SET  st be after recovery of total volume of load oil an	d must be equal to or exceed top allow-
V. TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test mus able for the state)	E DEPTH SET  Set be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,	d must be equal to or exceed top allow-
V. TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks  Length of Test	CASING & TUBING SIZE  FOR ALLOWABLE (Test mus able for to 1)  Date of Test  Tubing Pressure	E DEPTH SET  st be after recovery of total volume of load oil an this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure	d must be equal to or exceed top allowetc.)  Choke Size
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V. TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D	CASING & TUBING SIZE  FOR ALLOWABLE (Test mus able for to able for the able for to able for the able for to able for the able for th	E DEPTH SET  St be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Gravity of Condensate
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V. TEST DATA AND REQUESTOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  Lesting Method (pitot, back pr.)	CASING & TUBING SIZE  FOR ALLOWABLE  Date of Test  Tubing Pressure  Oil-Bbls.  Length of Test  Tubing Pressure	E DEPTH SET  Set be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Gravity of Condensate  Choke Size
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V. TEST DATA AND REQUESTOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  resting Method (pitot, back pr.)  VI. CERTIFICATE OF COMPLI  I hereby certify that the rules a Commission have been complication is true and complete to Criginal Signed  Cueve ## 54	CASING & TUBING SIZ	E DEPTH SET  St be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure  OIL CONSERVAT  APPROVED  Attion given blief.  Title  This form is to be filed in column is a request for allowal	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Gravity of Condensate  Choke Size  TON COMMISSION  mpliance with RULE 1104.  ole for a newly drilled or deepened
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V. TEST DATA AND REQUESTOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  resting Method (pitot, back pr.)  VI. CERTIFICATE OF COMPLI  I hereby certify that the rules a Commission have been complication is true and complete to Criginal Signed  Cueve ## Sh	CASING & TUBING SIZ	E DEPTH SET  St be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure  OIL CONSERVAT  APPROVED  Attion given belief.  Title  This form is to be filed in color well, this form must be accompanited the staken on the well in accorded All sections of this form must	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Gravity of Condensate  Choke Size  TON COMMISSION  mpliance with RULE 1104.  Dole for a newly drilled or deepened ed by a tabulation of the deviation ance with RULE 111.  be filled out completely for allow-
V. TEST DATA AND REQUESTOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  resting Method (pitot, back pr.)  VI. CERTIFICATE OF COMPLI  I hereby certify that the rules a Commission have been complication is true and complete to Crigin of Signed  Cuere # Signed	CASING & TUBING SIZE  FOR ALLOWABLE  (Test must able for a able fo	E DEPTH SET  St be after recovery of total volume of load oil and this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure  OIL CONSERVAT  APPROVED  This form is to be filed in confirmation in the second and tests taken on the well in accordant able on new and recompleted well  Fill out Sections I, II, III, a	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Choke Size  TON COMMISSION  mpliance with RULE 1104.  cole for a newly drilled or deepened ed by a tabulation of the deviation ance with RULE 111.  be filled out completely for allows.  nd VI only for changes of owner,
V. TEST DATA AND REQUESTOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  resting Method (pitot, back pr.)  VI. CERTIFICATE OF COMPLI  I hereby certify that the rules a Commission have been complication is true and complete to Criginal Signed  Cueve ## Sh	CASING & TUBING SIZE  FOR ALLOWABLE  (Test must able for a able fo	Bels. Condensate/MMCF  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure  OIL CONSERVAT  APPROVED  Title  This form is to be filed in co-  If this is a request for allowal well, this form must be accompanitests taken on the well in accordance taken on the well in accordance to me and recompleted well Fill out Sections I, II, III, a well name or number, or transporter	d must be equal to or exceed top allowetc.)  Choke Size  Gas-MCF  Choke Size  TON COMMISSION  mpliance with RULE 1104.  cole for a newly drilled or deepened ed by a tabulation of the deviation ance with RULE 111.  be filled out completely for allows.  nd VI only for changes of owner,