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

(Form C-19)
Ravised 7/5/57

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

New Well Recomple.

This form Small be submitted by one 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 3en . 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. Can must be reported on 15.025 psia at 60° Fahrenheit.

				Ab	ilene, Texa (Place)	<b>L#</b>	Dezenber	(Date)
			NG AN ALLOW				:	
	Company or C		Clug Company	(Lease)			., ın	··/4······ <b>3</b> 543
Undt 1	Se	.c3Q	, T <b>3 5</b> .,	R. <b> 37-E</b> ,	NMPM.,	luitt Per	n Bet.	Pool
Roess	welt		County. Date	Spudded11	19-60	Date Drilli	ing Completed	12-19-60
Ple	ase indicate	location:						9614
D	CE	A	Top Oil/Gas Pa	y <b>9576</b>	Name o	f Prod. Form.	Bough "C'	·
_			PRODUCING INTE	RVAL -				
- F	F G	77	Perforations_	9579-960	Depth	************	Depth	
E	F G	H	Open Hole	******	Casing	Shoe 965	Tubing	9594
			OIL WELL TEST	<b>-</b> ·				
L	K J		Natural Prod.	Test: ••••	obls.oil,	•⊷⊷ bbls wate	er in 🛶 hr:	Choke s, <u>⊕⊕</u> min- Size_
				<del></del>				equal to volume of
M	N O	P						Choke O_min. Size_3/
1		x	GAS WELL TEST			-		
							) Cl - 1	o:
		monting Page						ce Size
ruming ,Co Size	Esing and Ge	menting Reco		ing (pitot, bac)				
			_i		•			rs flowed
13 3/	8 360	275	Choke Size	Method of	Testing:			
			Acid or Fractu	re Treatment (Gi	ve amounts of r	materials used	d, such as acid	, water, oil, and
8 5/	8 4155	2690	sand): 50	0 gals. of	15% Acid			
4. 1.4	2 5586	600	Casing Press.	Tubing Press. 130	Date first :  j oil run to		4-60	
<del>"7 1.</del> /	2 3300	300	_	r Ne Yord		-		
2 3/	8 9594		l .	r				
emarks:								
					80	1 1 1 1 1		•••••
							•••••	•••••••
1 her	ehy certify	that the info	ormation given a	bove is true and	d complete to	the best of my	knowledge.	
Approved		4141 410 114	5		Coastal St	stee Gas I	roducing_(	company
*pproved	ŊĠ	•••••••			•	(Company	or Operator)	,
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by: //////	UJAI	114	Millefill	<u> </u>	Fitle <b>Produ</b>	Communicat	<b>xintenden</b> ions regarding	well to:
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-	(	- cag:			900	286 4541	Taves	