	 =
	 _
	 _
0;L	 _
GAS	
	1 1

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

(Form C-104) Ravised 7/1/5?

REQUEST FOR (OIL) - (GAS) ALLOWAPLE C.

Aug 17 8 13 All Succempletion

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 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 recompletio. 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° Fabrenheit.

		Midland, Texas August 13, 196 (Place) (Date)
EREBY RE	QUESTI	NG AN ALLOWABLE FOR A WELL KNOWN AS:
il Produ	cers	Well No. 1 , in N/E 1/4 N/W
pany or Ope	rator)	(Lease)
, Sec *	.7	T -8-S R -37-E NMPM Bluitt San Andres P
Roc	sevelt	County. Date Spudded 7/8/64 Date Drilling Completed 7/17/64
indicate lo	cation:	Elevation 4051°G.L. Fotal Depth 4630° FBTD 4581°
I B		Top Oil/Gas Pay 4410 tame of Frod. Form. San Andres
	"	PRODUCING INTERVAL -
-		Perforations 4410' - 4514'
G	n	Lepth Open Hole None Lasing Thoe 4630' Tubing 4451'
		OIL WELL TEST -
J	I	Cho Natural Prod. [est:bhls.cil,thls water inhrs,min. Siz
		Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume
0	P	Choke load bil used). bbls.oil, this water in hrs, min. Size
16501	<u> </u>	GAS MELL TEST -
OTACE)		The state of the s
		Method of Testing (pitot, back pressure, etc.): Back Pressure
		Test After Acid or Fracture Treatment: 3100 MCF/Day; Hours flowed 16
3731	400	Choke Size Various ethod of Testing: Critical Flow Prover, Back Pressur
46201	1.50	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, an
4630.	130	sand): A/3000, SF/40,000 gal. plus 60,000# sand
		Casing Pkr. Press. 450 cil run to tinks Gas Well
		Gil Transporte: None
		Gas Transporter Sinclair 011 & Gas
		
······································		
certify tha	it the info	ormation given above is true and complete to the best of my knowledge.
certify tha	it the info	
certify tha	it the info	ormation given above is true and complete to the best of my knowledge. BTA 011 Producers (Company or Operator)
certify tha	it the info	ormation given above is true and complete to the best of my knowledge. 19. BTA O11 Producers
certify tha	t the info	ormation given above is true and complete to the best of my knowledge. BTA 011 Producers (Company or Operator)
	pany or Ope , Sec Roc indicate lo B G J O & 1650* POTACE) ag and Gemen Feet	Roosevelt indicate location: B A G H J I O P & 1650 FWL POTACE) in and Gementing Record Feet Sax 373 400