NEW MFXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) 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 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 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.

					Odessa, Ti	exre	8/5/	(Date)
T 405 I	TEDEBY DEC	MITESTI	NG AN ALL	OWABLE FOR	` '	VN AS:	F	5
ARE	sım Oil Go	m deny	TO THE PERSON	N ALLOWABLE FOR A WELL KNOWN AS: G. M. COBDY Well No, in				NE 1/4,
	_			/ T \				
Unit Le	Sec	12	., T. 8 -6	, R. 34-6	, NMPM.,	LTTIMOGIA	- 001 134	. A.
Roos	evelt		County. D	ate Spudded	6/17/63 Total Dep	Date Drilling	Completed	6/29/63
Plea	se indicate loc	ation:						
			Top Oil/	Pay 4559	Name of I	Prod. Form	MI MILLO	
D C	C B	A	PRODUCING I		,/			
		x	Perforation	s 4620-22, 4	624-27, 2628-3	3, 4636-3) Depth	
E	F G	H	Open Hole_		Casing S	hoe 4700	Tubing_	4603.00
			OIL WELL TE					
L	KJ	I			bbls.oil,	bbls water	in <u> </u>	Chol min. Siże
					Treatment (after r			qual to volume
M	N O	P			ols, oil,trace_b			
			GAS WELL TI					
					MCF/Day;	Hours flowed	Choke	e-Size ➡
		Mar Page			pack pressure, etc.)			
ubing "Ca Size	sing and Cemen	SAX			e Treatment:			
	T T		7		of Testing:			
8 5/8*	331.23	250	1					
1 3 /00	1600 01	250	Acid or Fra	acture Treatment	(Give amounts of ma	terials used,	such as acid	, water, oil, a
4 1/2	4689.84	250	sand):	See Remar	Date first ne	W	<u> </u>	
2 3/8*	4603.00	-	Press.	Tubing Press.	oil run to ta	nks 8/3/6	3	
			Gil Transp	orter Perm	an Corporation	n		
			Gas Transp	orter none	<u> </u>	-4/20 0	00 mal. 1	se of w/l
temarks:.	Acidized	perfs.	twice w/2	000 gal. ea	ch time. Treat f pad volume a	nd 1/40/ 8	domite po	r gal. in
sand pe	r gal. dow	n 4 1/3	2"	frac.				••••••
								••••••
I here	eby certify tha	t the inf	ormation give	en above is true	and complete to th	ne best of my l	inowledge.	
pproved.				19	Su	n.OilComp	r Operator)	******************
					- 0.25	- Cul	ugh	
C	oil egnser	VATIO:	COMMISS	SION	Ву:	(Sign	ature)	
/	//////				Title Area Su	perintende	nt	
y: <i>(</i> ,	11.	-		*******************	Send C	Communicatio	ns regarding	well to:
Γitle					Name. Sun 0	il Company		
. ,							*	
					AddressBox.2	792, Udes	a, Texa	