## NEV IEXICO OIL CONSERVATION COMI SION Santa Fe, New Mexico

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

New Well

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

The Are Hereby Requesting an Allowable For a well known as:  Cities service of Company Government "F", Well No. 16., in. SR. 1/4. KM 1/4. (Company or Operator) (Luss)  Sec. 3 T. 14., R. 31., NMPM., Drickey Queen.  Pool (Unit)  Chaves County. Date Spudded. 10-3-54. Date Completed. 10-19-54.  Please indicate location:  Elevation. 4429. (DF). Total Depth. 3062!, P.B. —  Top oil/ges pay. 3044. Tesp of Prod. Form. Queen.  Casing Perforations: —					(Place) October 29, 1954.
(Company or Operator)  Sec. 3 , T. 14 , R. 31 , NMPM, Drickey Queen Pool (Unit)  Chaves County, Date Spudded. 10-3-54 , Date Completed. 10-19-54  Please indicate location:  Elevation. 4429 (Dr) Total Depth. 3062! , P.B. —  Top oil/geo pay 3C44 Top of Prod. Form. Queen Casing Perforations: —			-		
County Date Spudded. 10-2-54 Date Completed. 10-12-54 Please indicate location:    County Date Spudded. 10-3-54 Date Completed. 10-12-54 Please indicate location:    County Date Spudded. 10-3-54 Date Completed. 10-12-54 Please indicate location:    County Date Spudded. 10-3-54 Date Completed. 10-12-54 Please indicate location:    County Date Spudded. 10-3-54 Date Completed. 10-12-54 Please Date County Date Spudded. 10-12-54 Please Date County Date Prod. Total Depth. 3062! Please Date Prod. Form. Quasar Depth to Casing Perforations:   County Date Prod. Test. 133 BOPD Date on 133 bbls. Oil in. 24 Please Date Date Date Date Date Date Date Dat	Citie (Con	Service	• Oil Cor	npany Gover	Timent "B", Well No. 16, in SE 1/4 MN 1/4,
Chartes County, Date Spudded 10-3-54 Date Completed 10-19-54  Please indicate location:  Elevation 44-29 (DF) Total Depth 3062! P.B. —  Top oil/geo pay 3044 Top of Prod. Form. Queen Casing Perforations: — on Depth to Casing shoe of Prod. String 3037!  Natural Prod. Test. 133 BOPD based on 133 bbls. Oil in 24 Hrs. —0— Mins  Test after acid or shot. — BOPD Size Feet Sax Based on — bbls. Oil in — Hrs. — Mins  Gas Well Potential. — Size choke in inches. Pumping Well Date first oil run to tanks or gas to Transmission system: 10-27-54  Transporter taking Oil or Gas: Cities Service Oil Company — Trucked					
Please indicate location:    Elevation   1429 (DF)   Total Depth   30621   P.B.	(Unit)				
Elevation 4429 (DF) Total Depth 3062! , P.B. —  Top oil/gas pay				County. Date Spu	udded 10-3-54 , Date Completed 10-19-54
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Casing Perforations:  Depth to Casing shoe of Prod. String					Name
Casing Perforations:  Depth to Casing shoe of Prod. String				Top oil/gas p	pay
Natural Prod. Test 133 BOPD  based on 133 bbls. Oil in 24 Hrs -0 Mins  Test after acid or shot. BOPD  Casing and Cementing Record Size Feet Sax  Based on bbls. Oil in Hrs Mins.  Gas Well Potential   Cas Well Potential   Date first oil run to tanks or gas to Transmission system: 10-27-54  Transporter taking Oil or Gas: Cities Service Oil Company - Trucks  Thereby certify that the information given above is true and complete to the best of my knowledge.  Company of Operator  OIL CONSERVATION COMMISSION  By:  Cities Service Oil Company - Trucks  Signature  Title Asst. Division Supt.  Send Communications regarding well to:				Casing Perfor	rations:or
Natural Prod. Test 133 BOPD  based on 133 bbls. Oil in 24 Hrs -0- Mins  Test after acid or shot BOPD  Casing and Comenting Record Size Feet Sax Based on - bbls. Oil in Hrs - Mins.  360° 200 Size choke in inches Pumping Well  Date first oil run to tanks or gas to Transmission system: 10-27-54.  Transporter taking Oil or Gas: Cities Service Oil Company - Trucks  marks:  I hereby certify that the information given above is true and complete to the best of my knowledge.  proved 19 Cities Service Oil Company  OIL CONSERVATION COMMISSION By:  (Signature)  Title Asst. Division Surt.  Send Communications regarding well to:				<b>T</b>	
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Title Asst. Division Supt.  Send Communications regarding well to:		1		,,,	(Company or Operator)
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