					DIL CONSE Santa Fe, Ne	w Mexico				(Form C-104) Revised 7/1/57
		1115	REQ	UEST FOR	(OIL)	- (GAS)	ALLO	WABLE	000	New Well Recompletion
Form G- able will month b ered into WE ARI	form \$ be assig f comple o the sto E HERI	tall-be subn med effe etion or ock tanks	ubmitted b nitted in C ctive 7:00 recomple . Gas mus	the operator be CADRUPLICA A.M. on date of tion. The complet t be reported on NG AN ALLOV ic State	fore an initia ATE to the sa of completion etion date sh 15.025 psia a WABLE FOR	al allowable ame District or recomp hall be that at 60° Fahr Hob (Place) A WELL	will be ass Office of letion, prov date in the enheit. bs, how KNOWN	igned to any c which Form C vided this for case of an oil	completed (2-101 was s is alfd o I well when tobar 7	Oil or Gas well. ent. The allow- during calendar new oil is deliv- , 1959 (Date)
u Unit	Lotter	, Sec	~ {	, T. 145	R	, NMPM	., P	aunders	•••••••••••••••••••••••••••••••••••••••	Pool
•···•••••••••••••••••••••••••••••••••••	Lea			Elevation	Spudded	/21/59	Dat	e Drilling Co	pleted 10	0/2/59
P	lease inc	licate lo	cation:							99871
D	C	В	A	Top Oil/Gas Pa PRODUCING INTE		N	Name of Proc	d. Form. WC	and a	
				Perforations 2	5 22- 24:98			60-62:9906		-34 w/4 nft
E	F	G	H	Open Hole		C	Depth Casing Shoe		Depth Tubing	99541
L	ĸ	J	I	OIL WELL TEST						Choke
		x		Natural Prod.	Test:	bbls.oil,	t	obls water in	hrs,	min. Size
M	N	0	P						-	al to volume of Choke
		Ŭ								min. Size 1/2
				GAS WELL TEST	- 33	s Bopd	COR 12	0011 Gty 4	4.2° at	.72
19801 1					Test:	N	ICF/Day; Hou	urs flowed	Choke	Size
			ting Recor	d Method of Test	ing (pitot, b	ack pressure	e, etc.):			
Sure		Feet	Sax	Test After Aci T	d or Fracture	Treatment:		MCF/1	Day; Hours	flowed
13-3	/8 :	3151	325	Choke Size						
3-5	i/8• 4	2051	1200	Acid or Fractus			s of materi	als used, such	as acid, w	water, oil, and
5-1	/2710,	,020*	500	Casing Press	Tubing Press. 200	Date f	irst new in to tanks	10/6/59		
~		000	•	Oil Transporte	r	Service I	ine Lin	¥		
	TOS SI	9954		Gas Transporte	r!	iarran Pe	t. Corp.			
Remarks	:				······				•••••••••••••	·····
		•••••	••••••••••							
				rmation given a				st of my know		
	areby ce.	ruiy ina	t me muo		10	H	larvey L.	. Hurley		
Approve	u		OCT	······································	, 1.7		(Company or Op	erator)	
				COMMISSION	<i>_</i>	By:		en fin	<u>.</u>	eter L
								(Signature)	
By:	Ç.	<u></u>	K		•	Title. Age	Send Com	nunications re	garding we	ell to:
Title			Eng	ineer District	•				_	4.5
										·····
						Address			•••••	·····

		5-0 CC	
(File the original a	XICO OIL CONSERVAT SANTA FE, NEW ME and 4 copies with the ap	DXICO propriate district	
	TE OF COMPLIANCE A		950
Company or Operator			Atlantic State
Well No. Ac. 3 #5 Unit Le	tter 5 27 14	ويتجاذب والمتحد والمتحد والمتحد والمتحد والمحد و	Saunders
County Lea	Kind of Lease (Stat	e. Fed. or Patente	State B-9641
If well produces oil or cond	lensate, give location o	f tanks:Unit S	27 14 33 T R
		Service Pipe Line	60a
Authorized Transporter of	Oil or Condensate	Bel.AYCe LThe write	
Address		Box 337 Midland, 1	'ezas
Address(Give address t	to which approved copy	Box 337 Midland, 1 of this form is to b	e sent)
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The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the	7th day of Oct	ober 1	9	• /	
			Ву	2 in Round	
Approved	OCT 7 1959	19	Title Age	nt	
OIL CONSER	VATION COMMI	ISSION	Company_	Harvey L. Hurley	
Ву <u>//</u> /	19- and the second		Address	1012 Midland Nat'l Bank Bldg.	
Engineer District I			Midland, Texas		