NEW TXICO OIL CONSERVATION COMMY 'ON Santa Fe, New Mexico

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

New Well

REQUEST FOR (OIL) ######## ALLOWABLE.

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.

| | | | | (Place) | ····· | | (Date) | |
|------------|--------------|---------------------------------------|--|-----------------------|------------------------|-----------------------------|--------------------|--|
| E ARE H | EREBY R | equesti | NG AN ALLOWABLE | FOR A WELL K | NOWN AS: | | | |
| | | | Texas- West Ran | | 6 , in. | | 1 /4, | |
| (Corr | npany or Op | crator) Pac | ific CAO Co. (Le , T 12-5 , R 34 | ale) | ALL GANGE | (minute) | Pool | |
| Unit Lott | | | | | | | | |
| Los | ••••• | • • • • • • • • • • • • • • • • • • • | County. Date Spudde | d 2-22-59 | Date Drilling C | capleted 475 | - <u>77</u> | |
| Please | e indicate l | ocation: | Elevation ALT (D Top Oil/ Pay 102 | | | | | |
| D C | ЗВ | A | | Name | oi prod. rorm | | | |
| | | | PRODUCING INTERVAL - | | | | | |
| E I | P G | H | Perforations 10228-4 | | | | | |
| | | | Open Hole | Casi | ing Shoe 10959 | Tubing 103 | <u>N'</u> | |
| LF | <u> </u> | | OIL WELL TEST - | | | | Choke _ | |
| | | | Natural Prod. Test: | 30 bbls.oil, | 0 bbls water in | n 24 hrs, 0 m | in. Size_ | |
| | | | Test After Acid or Fra | icture Treatment (aft | ter recovery of volum | ne of oil equal to | volume of Choke | |
| M 1 | | P | load oil used): | bbls.oil, | bbls water in' | hrs, <u>0</u> min. | Size 1/2 | |
| 1 | 5 | | GAS WELL TEST - | | | | | |
| | | | _ Natural Prod. Test: | MCF/ | Day; Hours flowed | Choke Size | | |
| bing ,Casi | ing and Ceme | nting Reco | rd Method of Testing (pit | ot, back pressure, e | etc.): | | | |
| Size | Feet | Sax | Test After Acid or Fra | cture Treatment: | MCI | F/Day; Hours flowed | | |
| 3-3/8* | 3/11 | 375 | Choke SizeMe | thod of Testing: | | | | |
| | | | Acid or Fracture Treat | ment (Give amounts o | of materials used, su | ich as acid, water, | oil, and | |
| 8-5/8* | 4210' | 691 | | 1000 gallens | 15% regular as | 14 | | |
| K-1/2# | 103431 | 560 | Casing Tubin Press. Press | Date firs | to tanks Amril 2 | 0. 1999 | | |
| | | | Oil Transporter | | | | | |
| | | | Gas Transporter | | | | | |
| marks | Floring | | | | | | ••••••• | |
| | | | | <u> </u> | 14 22 | I Carlo Const | •••••• | |
| | | | | ~ | | | <u>.</u> | |
| I hereb | y certify th | at the info | ormation given above is | true and complete t | to the best of my know | owledge. | | |
| | | | , 19 | | Petroloun Can | | ····· · · · · | |
| • | | | | -11/1 | (Company or (| operator) | | |
| OI | L CONSE | EVATION | COMMISSION | By: | (Signatu | ure) | •••• | |
| 1 | G. | Sto. | | mil. Dist. | rict Chief Cle | - | | |
| | 11/ | K 1928 | Sfight Company to | Ser | nd Communications | regarding well to: | | |
| tle | | | · · · · · · · · · · · · · · · · · · · | I ht | llips Petroles | | | |
| | | • < | | Name | | | | |

Address Ber 2105, Habbe, New Merice