NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - GASSA ALLOWABLE

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.

				Hobbs, Maw Maxico (Place)					(Date)	
				NG AN ALLOW						
				uction Co	(Lease)	, Well No	in	NE	\$ E ¹ /4,	
1	(Company or Operator)			., т і.25 ,		, NMPM.,	Undes i gnat	od	Pool	
-				County. Date	Spudded		Date Drilling C	completed	••••	
Please indicate location:				Elevation	181 DF		epth 12,026	PBTD	9558	
r II	case mu			Top Oil/	y 9522	Name of	Prod. Form.	Wolfcamp		
D	C	В	A	PRODUCING INTE	== .					
-	F	G	Н			2: 9542-55 Depth		Depth		
E	•	G.	n			Casing	Shoe 12,026'	Tubing 9	<u>;00.64</u>	
T	К	J	I	OIL WELL TEST					Choke	
-	-	J	•				bbls water in			
			 				recovery of volum		Choke	
М	N	0	P	load oil used)	: 145.75 bbls	,oil, <u>160</u>	bbls water in 24	hrs, 🕳 r	min.Size	
				GAS WELL TEST	-					
-				Natural Prod.	Test:	MCF/Dav	; Hours flowed	- Choke S	ize 🛥	
hibling (Casing a	nd Cemer	nting Reco); <u> </u>			
ubing ,Casing and Cementing Size Feet S			SAX				MCI			
									10,100	
13 3	/81 34	0.26	250	Choke Size	Method 01	r lesting:				
			Total	Acid or Fractu	re Treatment (G	ive amounts of m	aterials used, su	ich as acid, wa	ater, oil, and	
8 5/	B·· 448	5.13	1290 *	T sand): Acid	ized w/500	cal rec (9	542-55): 250	O gal. re	- (9522-32)	
5111	12	006.8	rick .	Casing Call	Tubing 200	Date first n	ew 10-4-60 anks 10-16-60	•		
21	12,	000.0		-						
211	952	6. 28		ł		Oll & Gas				
	+ 61	5 eve	Incor	w/463 sxs D	a cel "B".	plus 12 sx	s Cal Chlori	de.		
(emarks	:	2		-1 1000	AL LOS	sam as the and	- 200 sys.		eexed	
p.l.us.	200s	IXS DO	301.) 18	al1290 sxs)		135 W/ 4% · ge/	20 1100		12	
w/.7.5.	\$X\$.1888	inga,s	QUeezed w/10	JSXSZNG1	Eage.		ladaa		
I he	reby ce	rtify th	at the inf	ormation given a						
pprove	d	5)UT 24	1960	, 19	Citles	Company or	iduction (Coperator)	O	
/	on c	ONSER	WATION	COMMISSION		By: Fresh	(Signate	ıre)		
M	111	14	W//	nd////	<u></u>	TitleDist.	Clerk	regarding we	ll to:	
ن ا دادات			Engine	er District		Send	Communications	regularing "c		
itle			/			Name 6 M.	Geyer			
		_				Address ROX 9	7. Hobbs. No	m Nexico		