DISTRIBUTION							
SANTA FE							
FILE							
U.S.G.S.							
LAND OFFICE							
	OIL						
TRANSPORTER	GAS						
PROBATION OFFIC	: E						
OPERATOR							

MEXICO OIL CONSERVATION COMMISSION Revised 7/1/57 Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWAFLE

HOBBS OFFICE OCC

New Well Recompletion

(Form C-104)

This form shall be submitted by the operator before an initial provide whitpe angred 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 recompletio. 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.

			•	•		<u>Maljamar</u> (Place)			11-26-62 (Date)			
-	F UF	DEBV DE	OUFSTI	NG AN ALLC	WABLE FO	K A WELL K	NOWN	AS:		、 ====,		
I	Leona	rd Nich	ols. A.	C. Taylor I	H	Well No	, I	in	SW	NW		
	(Compa	any or Ope	rator)		(Lease)	, NMPM.,		•				
	E	, Sec	10	, T ¹ ?	, R	, NMPM.,	Mal	Jamar			Pool	
Unit	Letter	Lea		County Da	te Spudded	10-31-62	Date	Drilling Co	mpleted	11-9-62	<u>,</u>	
···· •···	·····		······	Elevation	4128	Tota	al Depth_	4070	PBTD			
Please indicate location:		Top Oil/Gas	_{Рау} 3882	Tota	e of Prod	. Form	Grayby	ırg	······			
D	C	В	A	PRODUCING IN								
				Perforations	3882-	96. 3988-	94.	4010-20				
E	F	G	H	Open Hole	no	Dep Cas	th ing Shoe	4070	Depth Tubing	3980		
х												
L	K	J	I	OIL WELL TES					h		Choke	
-						bbls.oil,						
1/			P			re Treatment (af						
M	N	0	L L	load oil use	ed): <u> </u>	bbls.oil, <u>no</u>	bbls	water in <u>~</u>	hrs,	min• Siz	e	
				GAS WELL TES	<u>-</u>							
				Natural Proc	d. Test:	MCF	/Day; Hou	rs flowed	Choke	Size		
ubing	Casin	DTAGE) g and Ceme	nting Reco	rd Method of Te	esting (pitot,	back pressure,	etc.):					
Siz	re Te	Feet	Sax	Test After A	Acid or Fractu	ure Treatment:		MCF	/Day; Hours	flowed		
85	/8	302	200	1		od of Testing:						
5 <u>1</u>	<u> </u>	4070	350	Acid or Frac sand): 200	cture Treatmer 000 Pe F/h	t (Give amounts DOIL 400	of materi	als used, su SAND	ch as acid,	water, oi	l, and	
2 3	/8	3980			the second se	Date fir pump_oil run		-				
				Oil Transpo:	_{rter_} Texa	s New Mexico	<u>Pipel</u>	ine Co.	<u></u>			
				Gas Transpo	rter							
emarl	ks :					of gas to o	connect		• • • • • • • • • • • • • • • • • • • •		••••	
		Thi	s well	is pumping	••••••	••••					•••••	
									••••••	•••••••••••••••••••••••••••••••••••••••	••••••	
I	hereby	certify th	at the inf	formation giver	n above is tr	ue and complete Leonar	to the b	est of my know	owledge.			
opros					, 19	Leona		Company or (•• ••	
		_				Ø	P	MCCu	tono	n		
	OT	CONSE	RVATIOJ	Y COMMISSI	ON	By:	~~//	(Signatu	ure)			
/	[]]	11		11/	~	S [.]	uperint	tendent				
yc	<u> </u>	()		<i></i>	•••••••••••••••••••••••••••••••••••••••	TitleS	end Com	munications	regarding	well to:		
****-			~ •			Name Leo	nard N	ichols	·····			
fitle	•••••			••••••••••••••••••			Malja	mar, N.M.				

Deviation

• 、

1-.
$$3/4^{\circ}$$
23102-. $\frac{1}{2}^{\circ}$ 27663-. $3/4^{\circ}$ 30114-. 1^{\circ}34225-. $\frac{1}{4}^{\circ}$ 38166-. $\frac{1}{2}^{\circ}$ 4010

Q. L. Mc Cutchion

Subscribed to before me this 26th day of November, 1962

Kotary Public, Les County, New Mexico)

My Commission expires December 10, 1062