NEW 2XICO OIL CONSERVATION COMM 310N Santa Fe New Mexico

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

Recompletion

XXXXX

REQUEST FOR (OIL) - (CAS) ALLOWABLE OCC

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 Foun G 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.

					••••	Artesia, (Place)	New	MCX1CO	Septe	(Date)
VE A	RE H	EREBY R	EQUESTIN	NG AN ALLO	WABLE FOR	A WELL KN	NOWN	AS:		
	tine	ntal O	11 Compa		. Baish				NE	1/4 SE 1/4,
	(Con I	npany or Op , Sec	erator) 21	, т. 17 5	(Lease) , <u>R. 32E</u>	, NMPM.,	Wi	ldcat		Pool
-				County. Dat	e Spudded		Date	Drilling C	apleted	·····
		indicate		Elevation	4054	Tota	l Depth_	13,670	PBTD	
<u> </u>			<u></u>	Top Oil	ay_9850_	Name	of Prod	• Form	Wolfcar	np
D		B	A	PRODUCING INT					-	
_	_+		+	Perforations	<u> 9850 -</u>	9862			Dooth	
E		F G	H	Open Hole		Dept Casi	ng Shoe_	13,642	Tubing_	9,850
				OIL WELL TEST	-					-
L	1	K J	I	Natural Prod.	Test:	bbls.oil,	b	bls water in	nhrs,	Choke min. Size
			X							qual to volume of
M	1	N O	P	load oil used): <u>145</u> bbi	ls.oil, 100	bbls	water in 1	<u>9</u> hrs, -	Choke min. Size Open
				GAS WELL TEST						
						MCF/	Day; Hou	rs flowed	Choke	Size
ubdr	ng Casi	ing and Cem	enting Recor			ack pressure, e				
	Size	Feet	Sax							s flowed
	- 10					of Testing:				
3	3/8	428	550							
9	5/8	5,052	4,855							water, oil, and
				sand):	reated wi	th 5.000	gall	ons aci	d	
7	1	3,642	1,250	Press.	Press	oil run t	o tanks_	August	; 24, 1	959
				0il Transport	er MCWOOD	Corporat	tion			
		L	L	Gas Transport				<u></u>		<u></u> _
ema	arks :			1 5	·····				- N	1 1 1 1
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lor	ies		MOCC-4		[12-	<u>//</u>)	•••••••	•••••••••••••••••		••••••
			hat the info	ormation given	above is true :	and complete t	o the he	st of my kn	owledge.	
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I	l hereb	y certify t				Conti	nente	1.011.0	lompany	······································
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I	I hereb oved OI		ÿ	· _	, 19	By:	trict	Company or Company or (Jess (Signatu Super: munications	Company Operator) (Intende regarding	nt well to: