NEW EXICO OIL CONSERVATION COMP SION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (CAS) ALLOWABLE

New Well

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, New Marcico			_		
WE ARE	HEREB	Y REQUEST	ING AN ALLOWABL	· · · · · · · · · · · · · · · · · · ·	OWN AS:		(Date)	
			o., Inc. John			SW 1/4	NE	1/.
(C	Company o	r Operator)	() 	Lease)	30. 3 4.	·····/¶	***************************************	74,
Umate 1	Letter	Sec	, т 178 , г (32 5 , NMPM.,	PALT	mar	••••••••	Pool
	Les		County. Date Spud	ded 12-16-58	Date Drilling C	capleted	1-1-59	
		ate location:	Elevation 4092	Total	Depth 4393	PBTD	4374	
ם ו	C	ВА	Top Oil/Gas Pay_4	176Name	of Prod. Form.	Grayburg		
	~		PRODUCING INTERVAL -	•				
		4	Perforations 41	76-86; 4192-4200				
E	F	G H		Depth Casin	shoe 4392	Depth Tubing	41/.7	
		•	OIL WELL TEST -					
L	K	J					Ch	noke
		.		bbls.oil,				
M	N	0 P	B .	racture Treatment (after				
			1	91 bbls,oil, No	_bbls water in	hrs, MO	min. Size_	12/6/
<u> </u>	300 1	202	GAS WELL TEST -					
364, 1	173, I	1)48	Natural Prod. Test:_	MCF/Da	ay; Hours flowed	Choke S	i ze	
	_	Comenting Reco	ord Method of Testing (p	itot, back pressure, etc	.):			
Size	Fee	Sax	Test After Acid or F	racture Treatment:	MCF	/Day; Hours f	lowed	
10 3/	4 174	175	Choke Size	Method of Testing:				
	-							_
5 1/	2 4392	2 400	j	stment (Give amounts of				
1		_	Casing Tub	ing 500# Date first oil run to	new	e and ou.	UUU# saj	201
2 3/	8 4347		-					
			1	ras-New Mexico Pi	pe Line Compa	INY.		
			Gas Transporter	None		 		
lemarks:		•••••••••••••••••			***************************************	************************	••••••	
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	•		ormation given above is	•	•	•		
pproved	*************		, 19	Drilling	Company or C	nCompany	, Inc.	
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O	IL CON	SERVATION	COMMISSION	Ву:	(Signatur	<i>v</i> (
	11/1	Mar	Madiff	Tide Divisio	n Production	·	ndent	
1 · · //www	Tronder of sort	7	Jan Jan Marie Mari		Communications 1			
ītle	************		••••••••••••••		ing & Explora	-		<u>.</u>
				Address Box 2	075 Hobbs.	New Mext of	<u> </u>	