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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

Designate Type of Completion — (X) Date Spudded Date Compi. Ready to Prod. Total Depth F.B.T.O. Perforations Tubing Depth Tubing Depth Tubing Depth Tubing Depth Tubing Depth Tubing Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEME TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exable for this depth or be for full 24 hours) TUBING Producing Method (Flow, pump, gas lift, etc.) Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Choice Size GAS WELL Actual Prod. Test-MCF/D Length of Test Tubing Pressure(Shut-in) Casing Pressure(Shut-in) Casing Pressure(Shut-in) Choke Size OIL CONSERVATION COMMISSION			AND	
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DESIGNATION OF WELL AND LEASE Lease Name MCA Unit Color of Color	in Cwnership	Condensa Condensa	nte □ July 1, 1979.	
DESCRIPTION OF WELL AND LEASE Lease Name MCA Unit Color 4 130 Malana G-SA Line of Section 25 Township 17-5 East From The Line and 2615 Line of Section 25 Township 17-5 East From The Line and 2615 Feet From The	ge of ownership give name			
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State Federal or Fee LC. 058697 Continued Company State Company Compa	RIPTION OF WELL AND LEAS	SF		Lease No.
Continued Section 28 Township Townsh	Name	Well No. Pool Name, Including Form	ination.	
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OCT 12 1979	ting Method (pitot, back pr.)	bing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
OCT 12 1979			211 2011557/4	TION COMMISSION
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		ACT 12 1979	
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above is true and complete to the best of my knowledge and bester.				
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(Fignature) well, this form must be accompanied by a tabulation of	(Manature)		well, this form must be accompa	dance with RULE 111.
Division Manager All sections of this form must be filled out comple	Division Manager		All sections of this form mu	at be filled out completely for all

NMOCD (5) USGS (2) Partners (19), File

All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.