NEW XICO OIL CONSERVATION COMM. ON Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recomplexion

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.

		(Place)			9-13-61 (Date)	
WE ARE HI	EREBY RE	QUESTI	NG AN ALLOWABLE FOR A V	,		
			Garper-Cockburn-State "B"		, in SE !	/4NE
(Com	pany or Ope	rator)	(Lease)			
Unit Lett			, T 185 , R 33E , N	MYM.,	W110C	:atł
Le	18		County. Date Spudded6-12	-61 Inte Drill	ing Completed	9-7-61
	indicate lo		Elevation 4106 DF			
· · · · · · · · · · · · · · · · · · ·		A	Top Oil/Gas Pay 4121	Name of Prod. Form	Queen	
D C			PRODUCING INTERVAL -			
	<u> </u>		Perforations 4136'-416	Death	D11	
EF	G	H X	Open Hole	Casing Shoe 4410	Depth Tubing	4133
			OIL WELL TEST -			
LF		I	Natural Prod. Test:bbl	s.oil,bbls wa	ter inhrs,	Cho min. Siz
'			Test After Acid or Fracture Trea	•		
MN	1 0	Р	load oil used): 100 bbls.oi		. /	Choke
			GAS WELL TEST -	Annual and a set of the set of th	<u> </u>	
						Ci
<u>1980' F</u>						51Ze
Tubing ,Casi Sire	ng and Ceme: Feet	nting Reco Sax				
			Test After Acid or Fracture Trea			
11_3/4	314	275	Choke SizeMethod of Te	sting:		
			Acid or Fracture Treatment (Give	amounts of materials use	ed, such as acid,	water, oil, a
8 5/8	3065	250		5.000 gals frac a	11 + 22,5001	sand
7	4410	650	Casing Tubing Press. 100 Press. 250	Date first new _oil run to tanks Sep	tember 12. J	961
			Oil Transporter Cities Ser			
2 3/8	4110		Gas Transporter Vented			
Remarks:					•	•••••••••••••••••••••••••••••••••••••••
						••••••
I hereb	v certify the	at the info	ormation given above is true and o	complete to the best of n	ny knowledge.	
			, 19	arper Drilling Co	mpany, Inc.	
- PP- 07 00	~	/	1		ny or gerator	
O II	CONSEB	NATION	COMMISSION By:	Unerskie	ignature)	
				·	•	
By	10	<u> </u>	Tit	leVice.Presider Send Communica	tions regarding v	well to:
Title			Λ			
	7		Nat	me. Carper Drilli	ing Company,	Inc.
6	/					