NE PARXICO OIL CONSERVATION COM. ASSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recompletion

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 filled during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Artesia,	New Mexico	3/15/57	
/D . D D . T				(Place)		(Date)	
			G AN ALLOWABLE FOR			W . C W	
(Co	mpany or Ope	rator	Federal 19 (Lease)	, Well No	, in N e	5. 1/4 S. W. 1/4	
.K	Sec	19,	T. 18 S , R 84-1	§, NMPM.,	E.K. Quee	D Poo	
(Unit	!		County. Date Spudded				
			County. Date Spudded	10/1/100	, Date Completed	11/0/06	
Pleas	se indicate lo	cation:					
			Elevation 3982	DF Total De	pth 4704	P.B. 4471	
			Top oil/gas pay4	138	Name of Prod. Form	Quaen	
			Casing Perforations:	432-4444		or	
	x		Depth to Casing shoe	o Casing shoe of Prod. String. 4703			
		+	Natural Prod. Test	None	<i></i>	BOPD.	
			based on	bbls. Oil i	nHrs	Mins.	
		*****************	Test after acid or shot	27		BOPD	
Casing and Comenting Record Size Feet Sax			Based on	bbls. Oil i	n 24 Hrs.	Mins.	
8-5/8	3001	175	Gas Well Potential	very small	•••••••••••••••••••••••••••••••••••••••		
5-1/2	4705'	200	Size choke in inches	Pumpir	18		
			Date first oil run to ta	nks or gas to Tra	nsmission system:	arch 14, 1957	
			Transporter taking Oi	l or Gas: Cao1	tus Petroleum,	Inc.,	
emarks: W	ell Tre	ated wit	h 10,000 Gallons interval. Electr	of Lease	Crude and 10,	000 Lbs of Sa	
o	rom per: 1-3974'	rorated	interval. Electr	'io logs ru	in from Braden	Head elevation	
			nation given above is true	and complete to	the best of my knowledge. J. Sivley	ge.	
proved			, 19	-7	Company or Operat	or)	
OI	L CONSER	VATION C	OMMISSION	By:	(Signature)	e	
		1.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Title Own	lat		
:		e e e e e e e e e e e e e e e e e e e	<u> </u>	I ILICATARATA	Communications regard		
tle	*****			NameT.	J. Sivley		
				# 154441\\			