## NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe. New Mexico

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

**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 of a sign in the field priving to get a signed ar 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.

			Midland, Texas						1-27-60		
			(Place)						(Date)		
E ARE F	IEREBY R	EQUESTIN	NG AN ALLOV	VABLE FOI	R A WELL KN	NOWN A	NS:				
The	Pure Of	1 Company	y Sta	te-Lea "I	Well No.	2	in	SW	SE	1/4	
( <b>Co</b>	mpany or Or	perator)		(Lease)							
		22	, T. 18 <b>-</b> S	R. 35-E	, NMPM.,	Sou	th Vacuum	(Devo	nian)	Poo	
Unit Le					<b>11</b> 0 50				3 30 (0		
Lea		······································	County. Date	Spudded	11-2-27	Date	Drilling Com	pleted	1-10-00	) 	
Pleas	se indicate	location:	Elevation_ <b>30</b>	90. 301	Total	l Depth	11,110.	FBTD	دا ولل		
<u> </u>	<u> </u>		Top Oil/Gas Pa	y11,52	Name	of Frod.	Form.	evonia	n		
D	СВ	A	PRODUCING INTE	RVAL -							
					1.1.1.1 67bt						
E	F G	Н	Perforations	20 6 2 2	<u>ц'-11,67ц'</u> Depth			Depth	<u> </u>		
			Open Hole		Depth Casir	ng Shoe	11,769'	Tubing_	11,531	<u>.</u>	
			OIL WELL TEST	-							
	K J	I								Choke	
			Natural Prod.	Test:	bbls.oil,	bb]	s water in _	hrs,	min.	Size_	
					e Treatment (afte						
M	N O	P	load oil used)	: <b>275</b> ы	bls.oil,	bbls wa	ter in 11	hrs,	⊂ Chok ■ min. Size	ື່ມ	
	<b>T</b>										
			GAS WELL TEST	-							
			Natural Prod.	Test:	MCF/D	Day; Hours	flowed	Choke	e Size		
bing Cas	ing and Cem	enting Record	<b>d</b> Method of Test	ing (nitot. 1	back pressure, et	·c.):					
Size	Feet	Sax									
	1	1	lest After Aci	d or Fracture	e Treatment:		MCF/_	ay; Hours	s flowed		
11-3/4	457	475	Choke Size	Method	of Testing:			<u> </u>			
	<u> </u>								water oil	204	
8-5/8	3805	2088			(Give amounts of						
	1	<u> </u>	sand): 500	gallon b	reak down a	cid					
5-1/2	11769	230	Press. 700	Press. 40	Date first oil run to	tanks ]	-26-60				
		+			-New Mexico						
2	11531	1						<u></u>			
		·	Gas Transporte	r NODE							
marks :				·····			ā		••••••••••••••••••	•• ••••	
			2 11	AIIII	1. 19 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -						
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I hereb	by certify th	nat the infor	mation given al	bove is true	and complete to	the best	of my know	leage.			
proved	<i>ل</i> ل	N. 2.9. 19	50	, 19			Pure 011	*****	<b>y</b>		
	3		- 			Co Co	mpany or Op	erator)	( / )		
OI	L CONSE	RVATION	COMMISSION		By:	4.2	tree	~~~e	X		
1.					<i>,</i>		(Signature)	)	`		
	$Z_{i}$	1016	1101 10		Title	Chief	Clerk				
- Alf	[	, the state of the	he he was to	•••••	Sence	l Commu	nications re	garding v	well to:		
le		1	ية يعدد ا					-			
				/	Name	The F	ure 011	Company	<b>y</b>		
							571 - Mid		-		
					Address			a. 56884 g	• <b>UARO</b>		