NEW NEW	TAICO UIL CONSENT & HON COMMET ON Santa Fe. New Mexico	(Form C-104) Revised 7/1/57
REQUI	EST FOR (OIL) - (GAS) ALLOMABLEFF	OE OCCRecompletion

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 1660 4400 Form C-101 yas 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 Mexico August 1, 1960 (Place) (Date)
		-		FOR A WELL KNOWN AS:
John	M. Kelly Company or Op		State "EK" (Lea	, Well No 1 , inNE
	, Sec		., T 185, R	NMPM., Reeves Penn Pool
•			County Date Snudder	April 1, 1960 ate Drilling Completed June 6, 1960
	ase indicate l		Elevation 3896 KDE	Total Depth 12,284 FHTD 11,500
D	C B	A	Top Cil/Gas Pay 1050	Name of Fred. Form
E	FG	х Н	Perforations 10,977	-10892 Depth Depth Casing Shoe 12.280 Tubing 10.770
			CIL WELL TEST -	
L	K J	I		Choke <u>5</u> bbls.oil, <u>0</u> bbls water in <u>24</u> hrs,min. Size <u>16/64</u> ture Treatment (after recovery of volume of oil equal to volume of
M	N O	P		bbls.oil,btls water inhrs,min. Size 16/64
			GAS WELL TEST -	
Sec	Sec 23 T-18 R-35 Natural Frod. Test: MCF/Day; Hours flowedChoke Size			
Tubing ,Co	asing and Cem	enting Recor	M Method of Testing (pitc	pt, back pressure, etc.):
Size	Feet	Sax	Test After Acid or Frac	ture Treatment:MCF/Day; Hours flowed
13 3/	/8 342	400	7	hod of Testing:
8 5/	/8 3800	1100		ent (Give amounts of materials used, such as acid, water, oil, and
5 1/	12280	300	Casing Tubing	acid 21,000 gals + 18,500# Control frac Date first new 225 oil run to tanks August 1, 1960
	Gil Transporter Texas-New Mexico Pipeline			
Perseke:			Gas Transporter New	well no connection
INCIDALES -				
I her	eby certify th	at the info	ormation given above is t	rue and complete to the best of my knowledge.
Approved	 Λ :		БЛ, 19	John M. Kelly (Company or Øperator)
C	DIL CONSE	RVATION	COMMISSION	By: Kerruth D Mcfale
By:	Jung	Ker	hall the	Title Production Superintendent Send Communications regarding well to:
Title	ŗ •	Fn	gineer District	Name John M. Kelly
	2		-geo	Box 5671, Foswell, New Mexico