XICO OIL CONSERVICE COMM<sup>®</sup> ON NEW Santa Fe. New Mexico

(Form C-104) Ravised 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 Officeror Fighth-Egram C-101 was sent. The allow-able will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form i2 file guring calendar in the same data that the same data in the same of an all well when any will in delive 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.

				Но	(Place)	Mexico	Feb. 27. 1960 (Date)
		-		WABLE FOR A			
Com	any or Oper	ator)		(Lease)			<u>NW 1/4 NW 1/4,</u>
D Unit Lotte		24	T 188	, R. <b>35</b> E,	NMPM.,W	ildcat	Pool
<b>Le</b> i		•••••••••••	County. Da	te Spudded1	2-10-59	Date Drilling Cos	nplated 2-17-60
Please	indicate lo	cation :				•	FBTD <b>12_220</b>
D C	В	A	PRODUCING IN		Name Of	Fred. Form.	evonian
0				12,180 -	12.190		
E F	G	Н	1	•	7 Denth	Shoe 12,228	Depth Tubing <b>12,192</b>
		<u> </u>	OIL WELL TES	<u> </u>			
LK	J	I	Natural Prod	. Test:b}	ols.oil, <u>O</u>	tbls water in	Choke 6_hrs,min. Size
MN	0	P	4				of oil equal to volume of Choke
M	0	F	load oil use	d):_ <b>360</b> bbls.c	oil, <b>0</b>	bbls water in	hrs,min. Size 18
			GAS WELL TES	I			
	8-35		Natural Prod	. Test:	MCF/Day	; Hours flowed	Choke Size
ubing ,Casin				sting (pitot, back			
Size Feet Sax			Test After A	cid or Fracture Tre	atment:	MCF/:	Say; Hours flowed
13 3/	B <b>375</b>	350	Choke Size	Method of 1	esting:		
			Acid or Fract	ture Treatment (Giv	e amounts of ma	aterials used, such	n as acid, water, oil, and
8 5/8	3804	1100					
5 1/8	12,22	200					<u> </u>
2	12,19	2					
		<u> </u>		ter			
emarks:							
I hereby	certify tha	t the inf	formation given	above is true and	complete to th	ne best of my know	vledge.
pproved			·		Joh		
	• • · · · ·		N COMMISSIC		Ken	ut D	M Hel
ر کمبر ر کمبر		V			. )	Signature	)
r:	2/	<u>lll</u>	1760	T	itle <b>Proc</b> Send C	iuction Sup Communications re	erintendent egarding well to:
itle			1992 († 18 1	भू र व	une Johr	n M <b>, Kelly</b>	• • • • •
	4				Dor	5671 Roma	11, New Mexico