## NEW ? YICO OIL CONSERVATION COMMI ON Santa Fe, New Mexico

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

## REQUEST FOR (OIL) - (GAS) ALLOWABINEC. C.

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to the 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)	A MCCTOO		(Date)	
ARE H	EREBY F	REQUEST	ING AN ALLO	OWABLE FO	R A WELL K	NOWN AS:			
Cor	P CLL &	Derator)	pany 3	Care Lea 4	Well No	6 , i	n	4 33	
<b>B</b>	See	17	T 183	R 35	NMPM	North Yasus	n Devenias		
V									
Lee	••••		County. Da	te Spudded	8-13-63	Date Drilling	Completed	12-1-63	
Please	indicate	location:	Elevation	3793	Tota	1 Depth 1177	PBTD	11771	
D	В	A	Top Oil/Gas	Pay	NameName	of Prod. Form.	AAGUTUD		
	r		PRODUCING IN	TERVAL -		•			
<del>,   ,</del>			Perforations	11642-41	8, 11654-59,	11682-96, 11	705-710 A	11725-45	
EF	r G	H	Open Hole		Dept Casi	h ng Shoe 11778	Depth	DIME 11	
<u> </u>			OIL WELL TES						
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		.				bbls water		min. Size	
1 1	0		Test After A	cid or Fractur	e Treatment (aft	er recovery of volu	ume of oil equa	al to volume o	
<b>'</b>   '	'   '		load oil use	<sub>d)</sub> , <b>323</b> b	bls,cil,	bbls water in	12 hrs, 0	Choke min. Size	
ĺ			GAS WELL TES					-	
	& 1969:	PEL.		•					
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3-3/8	402	450	Choke Size	Method	of Testing:	·			
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7-5/8	dent	1060				new Decan's	1	<del></del>	
	0.004000000000							<u> </u>	
54	14,58	250				Pipe Line Con	Peny	<del></del>	
6 -3/1	11754	The	Gas Transport	er_PMIII	ps Petrolem	n Company			
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I hereby	certify th	at the info	rmation given	ahove is true	and complete to	the best of my kn	owledge		
roved			Biven	10		OLI & Gas Co			
- ~ T ~ W		******************	•••••••	, 17		(Company or	********		
OIF	CONSE	VATION	COMMISSIO	N	P	06			
	A.	VAVITON	COMMISSIO.	.,	Dy	(Signatu	ıre)		
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