NEW 'EXICO OIL CONSERVATION COM! SION 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 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.

				Midle (Plac	nd<u>,</u> Taxas :c)	.		(Date)
			ING AN ALLOWABLE					
(C)	ompany or O	perator)	No. No. #00# (Le	, We ase)	ell No	1, in	SE !/	4¥E1⁄4,
	-	-	, T 17-s , R 35	E , NMP	M., ¥ac t		••••••	Pool
			County. Date Spudde	d. Jeb	59 Dat	e Drilling Go	mpleted 🛒	ab. 18.1959
	ase indicate		Elevation 3076					
DI	СВ		Top Oil/Gas Pay	2811	_Name of Proc	. Form. Sem	Andres	theyburg
			PRODUCING INTERVAL	2841 to 429	61, 43201	to 4330*	, 43381	to 43481,
E	FG	H	Perforations H GALIT	60 H 37 0 H	Depth	OT ASAATE	0 11570	HOULT SO HOZ
		I	Open Hole <u>Neme</u>		Casing Shoe	47001	Tubing	4640
L	K J	I	OIL WELL TEST -					
-			Natural Prod. Test:	bbls_oil	.,t	bls water in	hrs,	Choke min. Siże
		·	Test After Acid or Fra	cture Treatment	: (after recov	very of volume	of oil equa	al to volume of
M	NO	Р	load oil used): <u>12</u>	bbls.oil,	O _bbls	water in 🋓	hrs, O	Choke min. Size 35/6
			GAS WELL TEST -					
·								
	-days and Con		- Natural Prod. Test:					Size
size	sing and Cer Feet	Sax						
		1	Test After Acid or Fra					
5/8=	1.625	900	Choke SizeMe	thod of Testing				
			Acid or Fracture Treatm	ment (Give amour	nts of materi	als used, such	n as acid, w	ater, oil, and
1/2"	4,689	300	sand): See Sec.	-				
ł	4,630		Casing Tubing Press. 2700 Press	q Date	first new	Manah ()	3050	
		+						····
			Oil Transporter Te		•			
	AA		Gas Transporter					
marks:	Send fre	eIron.l	12841 to 46241 with		18	99. 911. 83	130,000	.1bs. sand.
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I here	by certify t	hat the info	rmation given above is (true and compl	ete to the be	st of my know	vledge.	
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	•				(C 1.25			
0	IL CONSE	RVATION	COMMISSION	By:	find the second s	(Signature	<u> </u>	
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	C.L.J.	L.L.	fill of fill	TitleA		District		ll to:
le							000	
				NameJ	GBlev	ins, Jr.		
				Address :	P. A. Res. 2	52, Midla		
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