NEW MI CO OIL CONSERVATION COMMISS & Santa Fe, New Mexico

(Form C-194) Revised 7/1/57

REQUEST FOR (OIL) - (SEAS) ALLOW APLE 0. C. C.

LIGHWARIGE O. C. C. New Well Recompletion

This form shall be submitted by the operator before an initial allowable will the stiffned for any extincted 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. Tas must be reported on 15.025 psia at 60° Fahrenheit.

		(Place)			А	(Date)	
			NG AN ALLOWABLE				VE
(Comp	pany or Ope	rator)	(L	case)			
Unit Letter	, Sec •	27	., T 175 , R	352 , NMPM.,	Undesignated		Po
les			County. Date Spudd	ed3-22-64	Date Drilling C	completed	4-764
	indicate lo		Elevation 3935	. Total	Depth 6300	PBT D	_6265
D C	В	A	Top Oil/Gee Pay_6	Name of	of Prod. Form	Paddook-	
			PRODUCING INTERVAL -			•	
	G	Н	Perforations613	8-6176 Depth		Depth	
, ,	.	"	Open Hole	Casin	g Shoe 6299	Tubing	6130
			OIL WELL TEST -				Cho
K	J	I	Natural Prod. Test:	<u>132</u> bbls.oil,	bbls water in	hrs, _	
			Test After Acid or Fr	racture Treatment (after	r recovery of volum	me of oil equa.	l to volume Chake
N	0	P	load oil used): 10	bbls.oil,	_bbls water in	hrs,	min. Size
ł			GAS WELL TEST -				
			Natural Prod. Test:	MCF/D	ay; Hours flowed	Choke S	i ze
ing Casir	ng and Ceme	nting Reco		itot, back pressure, et			
Size Feet Sax			racture Treatment:				
				Method of Testing:			
3 3/89	336	350					
5/8*	3012	1700		tment (Give amounts of		ich as acid, we	11.011, 0
			Casing Tub		new		
} u	6288	1001		ss. 2500 oil run to	-	•	
- 2/01	4790	Wa alaaw	1	as-Nor Mexico Pi	•		
2 3/84	6130	Packer		llips Pateslow			
narks:			and the state of t	******************	***************************************	************************	***************************************
·····				***************************************		•••••	
					.1.1.4.6		
I hereby	certify th	at the inf	ormation given above is	s true and complete to	the best of my kn	owiedge.	<u></u>
proved		DP 1.5	19, 19		(Company or	Operator)	
				Bu. Cal	Robertso (Signatu		
OIL	CONSE	KVATION	COMMISSION	Бу	(Signati	ıre)	
1				TitleDist	wiet Clerk		
.Z(7 244	i. I	Seno	Communications	regarding we	u t o:
e				NameE.	. Wilder	*****	
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