## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

## REQUEST FOR (OPE) DEFICE AS L. ALLOWABLE

New Well

This form shall be submitted by the operator before an initial ellowable 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.

(Company or Operator) (Lease)	A WELL KNOWN AS:
(Company or Operator) (Lease)	
(Company or Operator) (Lease)	, Well No. 5-35 , in SE /4 NV /4,
D . 92 368 - 6/ 11	• • •
Uan Letter	, NMPM., Undosignated Pool
Lea County, Date Spudded	5-22-54 Date Drilling Completed 7-8-64
Please indicate location: Elevation 3710 G	rdTotal Depth5286PBTD5230 *
Top Oil/Gas Pay 4576	Name of Prod. Form. Queen Fm.
D C B A PRODUCING INTERVAL -	
	4921-23, & 5144-50 <sup>1</sup>
	76, 4595-96, 4606, 4618, 4627-28; 4871-74, Depth Depth Depth
O Open Hole	Casing Shoe 5230 Tubing 4576
L K J I	Choke
Natural Prod. Test:	bbls.oil, bbls water in hrs, min. Size
	Treatment (after recovery of volume of oil equal to volume of
M O P load oil used): 45 bbl	Choke ls.oil, <u> </u>
GAS WELL TEST -	
	MCF/Day; Hours flowedChoke Size
·	ack pressure, etc.):
Test After Acid or Fracture	Treatment: MCF/Day; Hours flowed
-5/8 264 125 Choke SizeMethod o	of Testing:
Acid or Fracture Treatment (	Give amounts of materials used, such as acid, water, oil, and
-1/2   5230   350	
Casing Tubing	1. Bo too gals. Nesse of 43,000 lbs. se Date first new oil run to tanks 7-25-64
	Wood Corporation
	illips Petroleum Co.
narks:	
frank Julie Cyl.	
I hereby certify that the information given above is true a	and complete to the best of my knowledge.
roved, 19	ERNEST A. HANSON
	(Company or Operator)
OIL CONSERVATION COMMISSION	By: (Signature)
1000	en 4 • •
70 - Many	Title Geologist Send Communications regarding well to:
	ocity Communications regarding were to
/	Name