NEW EXICO OIL CONSERVATION COMP. JON

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.

					Hobos, (Plac	New Mex	ico Ma	reh 31,	, 1959 (Date	••••
E ARE H	EREBY F	EQUEST	ING AN ALLO	WABLE FC	DR A WEL	L KNOWN	AS:			,
CAGGUS	prill	ing Con	a pany	Aztec=S	S tate , We	ell No2	, in	NW	NE	
(Company or Operator) B Sec. 31			_ 19	(Lease) _ 35)	Deen	1 Oueen		, -	
Unit Let			, T + -	., R	, NMP	M.,	T Aucon	•••••••••••••••••	·····	Pool
Lea		· · · · · · · · · · · · · · · · · · ·	- County Day	te Spudded F	Feb. 8,	1959 Dat	e Drilling C	completed	arch :	27. 1
Please indicate location:			County. Date Spudded Feb. 8, 1959 Date Drilling Completed March 27, 1 Elevation 3733 Total Depth 4927 FBTD							
		Top Oil/Gas I	Pay 4888		Name of From	Eorm.Que	en			
D C		A	PRODUCING IN			-				
	I									
EF	P G	H	Perforations			Depth		Conth		
			Open Hole	4832-492	27	Casing Shoe_	4832	Depth Tubing	4898	
			OIL WELL TEST	<u> </u>						
		I		_	bble of t	, no t	ble water :-	24		Choke
M N	1 0	P				: (after recov			~	
			load oil used	i):i	bbls.oil,	bbls	water in	hrs,	min. Siz	e
			GAS WELL TEST	<u> </u>						
3/8" 107		100	Test After Acid or Fracture Treatment:MCF/Eay; Hours flowed Choke SizeMethod of Testing:							
5/8	1875	pulled	- Acid or Fract	ure Treatment	(Give amou	nts of materia	als used, suc	h as acid,	water, oil	l, and
Y I	4832	125	sand): Casing	Tubing	Date	first new				
	·	ļ	Casing Press. 200#				March 2	3, 1958	•	
			Oil Transport	er Permis	u olt	Company				
			Gas Transport							
narks:						•••••			·····	
••••••		·····								
						••••••				••••
I hereby	certify th	at the info	rmation given a	above is true	and compl	lete to the bes	t of my know	wledge.		
						s Drilli				
				,	,	4 10	Company or O	perator		
OIL	CONSEI	RVATION	COMMISSIO	Ń.	By:	Vierege	- / 90	12-		
	- 1				-		(Signature	•)		
	En Y	Up	Upa li	Ĺ	Title V1	ce-Presi	dent			
•			16			Send Comm	unications r	egarding w	ell to:	
		<i>J</i>		•••••	Name G	eorge Ba	ker			
					Address	Box 182	D, HODD	B. N.M.		