## NEW M. AICO OIL CONSERVATION COMMIS ON Santa Fe, New Mexico

## 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

			•	•		Arkansas	••••		
E ARE HEREBY REQUESTIN		NC AN ATT	OMADIE EC	(Place)		(Date)			
		•			RA WELL KI Ma, Well No.		SW	ı/ SE	1/
(Co	mpany or Op	erator)		(Lease	)	•		•	,
P	, Sec	24	, т. <b>205</b>	, R <b>35E</b>	, NMPM.,	Undesignate	ed (Eumont	t) 1/-	, Pool
(Unit)								_	
	e indicate l		County. L	Date Spudded	July 17	, Date Comp	oleted97.24	/20	
- I ICas	- Indicate i	l l							
			Eleva	tion3,665	Total D	epth <b>4,032</b>	, P.B	4,027	•
			Торо	oil/gas pay <b>3</b> .	,963	Prod.	FormSex	zen Rive	ers
			Casing	g Perforations:	4,017 to	4,026	:		or
			Depth	n to Casing sho	e of Prod. String.	4,027			····
			Natur	ral Prod. Test	·····	128			BOPD
		0	based	on58.7	bbls. Oil	in. 11	Hrs		Mins.
	······································		, m	c					BO DD
	and Cement		lest a	after acid or sh	ot	***************************************	••••••		bUrD
Size	Feet	Sax	Based	on	bbls. Oil	in	Hrs	<b>.</b>	Mins.
8 5/8"	293	150	Gas V	Well Potential.	<b>***</b>				
<u> </u>	233	1,00	Size c	choke in inches					
5 1/2*	4,019	232	Date	first oil run to	tanks or gas to Ti	ransmission syster	n: <b>8/</b> !	5/56	
· · · · · · · · · · · · · · · · · · ·					•		•	•	
			Trans	sporter taking (	Oil or Gas:	MeWood Corpor	ration		
.emarks:			·						•••••
	••••••		• • • • • • • • • • • • • • • • • • • •				***************************************		
I hereb	y certify th	at the info	rmation give	n above is tru	e and complete to	o the best of my k	knowledge.		
pproved	••••••	<del>Aliborí</del>	1-1455	, 19	Meales	PR JUEL COM			
	$\triangle$				- A	Lau			
OI	L/CONSEI	RVATION	COMMISSI	KON /	Ву:	(Signa	<b>f</b>	·····	
v:		M.	XII	edel	TitleChi	of Engineer	•••••		
		_			Send	d Communication	ns regarding	well to:	
itle	र्भा	zireer Di	me II	······································	NameC	es. Dillard	•••••		
					Address Bo	ox 210 Magno	olia, Ark	ansas .	