

NEW MEXICO OIL CONSERVATION COMMISSION  
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.

**Monument, New Mexico**

**March 15, 1956**

( Place )

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Amerada Petroleum Corporation State WM "D" \_\_\_\_\_, Well No. 2 \_\_\_\_\_, in NE \_\_\_\_\_ SE \_\_\_\_\_,   
 (Company or Operator) (Lease)

**I** \_\_\_\_\_, Sec **15** \_\_\_\_\_, T **19-8** \_\_\_\_\_, R **36-E** \_\_\_\_\_, NMPM, **Undesignated** \_\_\_\_\_ Pool  
(Unit)

Loc. \_\_\_\_\_ County. Date Spudded 2-20-56, Date Completed 3-5-56

Please indicate location:

			●
		Section 15 State WM "D" #2	

Elevation **3758 D.F.** Total Depth **4240'** P.B. **4235' (DOD)**

Top oil/gas pay 453' Name of Prod. Form Penrose

Casing Perforations: 4153' to 4190' & 4205' to 4230' or

Depth to Casing shoe of Prod. String. 4240'

Natural Prod. Test None BOPD

based on.....bbls. Oil in.....Hrs.....Mins.

Test after acid or shot.....**Pumped 44.72**.....BOPD

Based on 44.72 bbls. Oil in 24 Hrs. 0 Mins.

Gas Well Potential.....

Size choke in inches.....

Date first oil run to tanks or gas to Transmission system: **March 15, 1956**

Transporter taking Oil or Gas: **Texas-New Mexico Pipe Line Company**

Remarks: **New Well Completed March 15, 1956**

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved....., 19.....

**Amerada Petroleum Corporation**  
(Company or Operator)

~~OIL CONSERVATION COMMISSION~~

By: C. M. L. L. L.

**Title** .....

By: [Signature]  
(Signature)

Title **Foreman**

Send Communications regarding well to:

Name Amerada Petroleum Corporation

Address Drawer D. Monument. New Mexico