N! MEXICO OIL CONSERVATION CO! ISSION 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.

| ontinental (NI Company (Company or Operator) H, Sec. 2 | | | Lease T 200 R 35E | A in SE | n SE 1/4 1885 1/4, | |
|--|---------------|----------------------------|-------------------------------------|---|--|----------------------|
| (Uni | t) | | | | , Date Completed 11-18- | |
| | use indicate | | County. Date Spudded | . | , Date Completed | |
| T | | | | - | th | |
| | | 33 | Top of Gas pay | 39961 N. 4276=42901, 4.2 40 50-40601, 40 | me of Prod. Form.38561 24-42341, 4256-42531 57-40341, 2993-40301 | Cusen , 4162-4176 |
| | | | Depth to Casing sho | e of Prod. String | <u> </u> | |
| | | | Natural Prod. Test | | | BOPD |
| | | | based on | bbls. Oil in. | Hrs | Mins. |
| | 51 [6] | | Test after acid-or sh | ot | | B opd |
| Casing Size | r and Comen | | | bbls. Oil in. | // Hrs | Mins. |
| 5/8 | 35319 | 225 | Gas Well Potential | | | |
| 7/12 | 12791 | 3250 | Size choke in inches | | | |
| | | | Date first oil run to | tanks or gas to Tran | smuston system : 12-1-55 | |
| ****** | | | Transporter taking (| Dil Was Atlanta | o Tine Line Commany | |
| emarks: | | | | | | |
| | | | | | | |
| I here pproved | by certify th | hat the inform | mation given above is tru 引うち 19 | | ne best of my knowledge. | |
| pproved | | (- <u>Lan</u> e - Constant | | Y | (Company or Operator) | |
| OIL CONSERVATION COMMISSION | | | | Ву: | (Signature) | |
| / : | U. M | 1 | edel | Title | rict Swarinterdent | -11 |
| tle Engineer District 1 | | | | Send Communications regarding well to: | | |
| | ······ | ····· | | Name | | |
| | | | | Address Doc: | 127, Hebbs, Her Mex | ico |