## NEW MI CO OIL CONSERVATION COMMISS & 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

			•			(Date)
EREBY R	EQUESTI	NG AN ALLOW	ABLE FOI	(	AS:	(Date)
sh-Amer eing Ce	'ighn Mgany	North Doop	Wilson Dait	Well No. 1	in <b>81</b>	1 1/4 SE 1/4
, Sec	3L	, T. 2000,	R. Je-s	, NMPM., UNGES	fasted (we)	Pool
		County. Date	Spudded	1/1/64 Date	n Drilling Coupl	ated 4/22/64
indicate	location:	Elevation	3653' KB	Total Depth_	12,725'	PBTD 11,755
	100.11.	Top TA/Gas Pay	14,353	Name of Prod	. Form. Mora	ov Sand
, B	B   A		************			
	1 1	Panfanations	11.353'	- 11 176 FR		
G	G H				11 085	Depth Tubing 11,262
		,	,	Casing Shoe	41,707	Tubing ***
· -	JI	OIL WELL TEST	•			Char
		Natural Prod. 1	Test:	bbls.oil,b	bls water in	Choke hrs, min Siże
		Test After Acid	d or Fracture	Treatment (after recov	ery of volume of	oil equal to volume of
_		load oil used):	bk	ols.oil,bbls	water inh	Choke rs,min. Size
			•			
				14 MCE/David Manu	flowed 1-1/	Zchala sia 2"
og and Com	enting Record				· · · · · · · · · · · · · · · · · · ·	
Feet	Sax					
		ž –				
316	325 ex	Choke Size	Method	or Testing:		
7010		Acid or Fractur	e Treatment	(G <del>ive</del> amounts of materia	ls used, such as	s acid, water, oil, and
2347		sand): <b>Mem</b>	<b>1</b>			
11.985	1165 m	Casing Press. Pkg	Tubing Press.	Date first new oil run to tanks		
		1				
				Mesetisted		
-		- Gas Transporter				
•••••••	••••••••		****************	***************************************	*******	
•••••	••••••	•••••		***************************************	******************************	***************************************
				1 1 4 4 4 4 4 4 4 4 4		L
certify th	at the infor	mation given ab	ove is true	and complete to the bes	t of my knowled	ige. Productno Company
	1065	•••••••••••••	., 19	(C	ompany or Opera	tor)
SONTET.	141 MT-1~2.					
CONSEI	RVATION	COMMISSION		Бу; <i>Д.Г</i>	(Signature)	<i>T.G.</i>
	<u> </u>			•	(Signature)	7.9
	<u> </u>	COMMISSION		Title District Ex	(Signature)	
	<del>}</del>			Title District Ex	(Signature)  gineer  junications regar	rding well to:
	indicate  indicate  B  G  G  J  Central Centra	indicate location:    B	County. Date indicate location:  County. Date Elevation Top M/Gas Par PRODUCING INTER Perforations Open Hole OIL WELL TEST Natural Prod. Test After Acid Indicate location:  OPEN HOLE OIL WELL TEST Natural Prod. Test After Acid Indicate location:  OPEN HOLE OIL WELL TEST Natural Prod. Test After Acid Choke Size  Test After Acid Choke Size  Test After Acid Choke Size  Test After Acid Test After Ac	County. Date Spudded.  Indicate location:  B A PRODUCING INTERVAL - Perforations 11,353'  Open Hole OIL WELL TEST - Natural Prod. Test: Test After Acid or Fracture load oil used): GAS WELL TEST - Natural Prod. Test: Test After Acid or Fracture Choke Size Method  Acid or Fracture Treatment sand): Casing Press. Cil Transporter Gas Transporter Gas Transporter Gas Transporter Gas Transporter Being Certify that the information given above is true:	EREBY REQUESTING AN ALLOWARLE FOR A WELL KNOWN  Brand Files	ERBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:  Sec. 31

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 $1 \leq 1 \leq k \leq k \leq k \leq 1$ 

 $C = \{x_1, \dots, x_n\} \in \mathbb{R}^n \times \mathbb{R}^n \times$ 

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