KICO OIL CONSERVATION COMMI ON

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

(Form C-104) Revised 7/1/57

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.

		-	•			ior Hariso	July 2	, 1959
			NG 4N 477.6	B. B. B.	(Place)	/ N		(Date)
		_	NG AN ALLO			knuwn as: 'o <u>1</u> , i	Mile	/ 14.
(Co	empany or O	perator)		(Lease)		,		•
C Unit L	Sec		, T 20	, R 38	, NMPM.,	Understand (ikagya Int.	P00
Lo	 }		County. Da	te Spudded	/25/59	les qui et	tompleted	6/29/59
Plea	se indicate					tal Depth 986	PBTD	
D	СВ	A	Top Oil/Gas	Pay_ 390 6	Nan	me of Prod. Form.	Grayburg	······································
	~ ~		PRODUCING IN	TERVAL -			•	
E	F G	H	Perforations	3906-14139	64-7213900	-ar two-tero	w/R per ft	
-	• •	n	Open Hole		Cas	sing Shoe 3719		3635
	_		OIL WELL TES	<u>-</u>	•			
L	K J	I	Natural Prod	. Test:	bbls.oil,	bbls water	inhrs,	Choke min. Size
			Test After A	cid or Fractur	e Treatment (at	fter recovery of vol	lume of oil equ	al to volume of
M	N O	P	load oil use	d): 23 t	bls.oil,	bbls water in	24 hrs,	_min. Size
			GAS WELL TES	<u>-</u>				
6601 D	N & 190	01 Tr W	_ Natural Prod	• Test:	мсг	F/Day; Hours flowed	Choke	Size
Tubing ,Ca	sing and Cem	enting Reco	rd Method of Te	sting (pitot,	back pressure,	etc.):		
Size	Fret	Sax	Test After A	cid or Fractur	e Treatment:		MCF/Day; Hours	flowed
oopts7			Choke Size	Method	of Testing:			
7000	4000	50	Acid or Fract	ure Treatment	(Give amounts	of materials used,	such as acid,	water, oil, and
7**	8301	50 ax	1			w/ 1-126 arg		
4-1/2-	37191	100 ax	Cacino	Tuhing	Date fir		_	
	 				l Pipe Lin			
2º th	• 3635	1	1					
· Remarks:	Acid in	i. stages.				r-stages-wains	-bell-seel	479
		***************************************	•••••				•••••	
				.,			••••••	
I here	by certify th	hat the info	rmation given	above is true	and complete	to the best of my k	nowledge.	
Approved				, 19	R Q ST	(Company o	Onerstor)	
		10 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		العير	_ (y Operator,	<i>[</i>
0	IL CONSE	RVATUON	COMMISSIC	N" /2	By:	(Signa	ture)	
a. /	1/11 1	1///2	Ca. 1111.		Title Agent.			
y	of profession have suffer	(G.: 4	eyteteeryfeteryfelsenteereere	***************	Se	nd Communication	ns regarding w	ell to:
Title		<i></i>	· · · · · · · · · · · · · · · · · · ·		Name OIL	REPORTS Box	763 Hobbe,	No Ko
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