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U.S.G.S.				
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	OIL		- I .	
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	HOBRA
N W MEXICO OIL CONSERVATIO	COMMISSION (Tofm-C,104)
Santa Fe, New Mexico	TAP 9 Revised 7/1057C
REQUEST FOR (OIL) - (CCASS)	ALLOWABLE 47 PH By
	XXXXXXXX
	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.

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Continental Oil Company Britt B well No. 20 in NW y SW y, Long Section 20 in NW y SW y, Long Section 20 in NW y SW y, Long Section 20 in NW y Stress 20 in NW y SW y, Lease 10 in the section 20 in NW y Stress 20 in the section 20 in NW y Stress 20 in the section 20 in NW y Stress 20 in the section 20 in NW y Stress 20 in the section 20 in NW y Stress 20 in the section 20 in the s	crea ma	y uic so		J. V		Hobbs,	New Mexic	0	March	2, 1
Continental 011 Company Britt B well No. 20 , in NW 1/2 SW 1/2 (Low) Company or Operator) Yes Lea T 20S R 37E NMPM, Blinebry Pool T 20S R 37E NMPM, Blinebry Pool County Data Spudded UD 1-27-64 Data Detilling Completed UD 2-7-64 Please indicate location: Elevation 3564 Tests Detilling Completed UD 2-7-64 D G B D G B P G H Pool F G D G B P G H P Pool F P G H P G H P Pool State P F G N O P L K J Z N O P P Itak J Z Pool County Data Sputded Line Test State State Descriptions State Rescription State Test After Scid or Fracture Treatment (after recours) foucts of on the state State State					•	(Place)			_	
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