NL BER OF BANTA FE FILE	DISTRIBUT			NEWI	MEXICO O	IL CONS Santa Fe, N		N СОММ	IISSION	(Form C-104) Revised 7/1/57
U.S.G.S. LAND OFFIC TRANSPORT PRORATION				REQU	JEST FOI	(OIL)	- (GAS) HOB	ALLOW BS OFFICE		New Well
Form C able wil month	-104 is to 11 be assign of comp	o be subi gned effe letion or	mitted in ective 7:0 recompl	QUADRUPL 0 A.M. on da etio: The co	ICATE to the te of completic mpletion date	same Distric n or recomp shall be that	t Office to whe pletion, provid t date in the c	hich Form C led this form	om _r sieted (-101 was so n is filed d	Recompletion Dil or Gas well. ent. The allow- luring calendar new oil is deliv-
ereu in	to the st	ock tank	s. Gat mu	ist be reported	on 15.025 psia	at 60° Fahrenheit. Nobbe, New Nexton November 14, 19 (Place) (Date)				
					OWABLE FO					
	Compar	iy or Ope	rator)		JLALO "U" (Lease)	, Weil	No	, in	NK !/4	
I	n Letter	, Sec		, T. 205	, R 37.K	, NMPM	1., Nepu	entTubl	.	Pool
Le	-			County D	ate Spudded	10-11-63	Date	Deilling Com	nlated	
1	Please in	dicate lo	cation :		35501 DF					
	Re-378	B		Top Oil/Gas	Pay	1	Name of Prod.	Form	had de	Ser
				PRODUCING	NTERVAL -					
				Perforation	s65021					
E	F	G	H	Open Hole			Depth Casing Shoe	65001	Depth Tubing	65361
	800			S OIL WELL TE	<u>- 17</u>					
L	K	J	I	Natural Pro	d. Test:	bbls.oil.	bbl	s water in	hrs.	Choke min. Size
			4 .		Acid or Fractur					
M	N	0	Р							Choke min. Size 3/LW
				GAS WELL TE						
_1960	I PSL	t 6601	PEL	- Natural Pro	d. Test:	1	MCF/Dav: Hours	flowed	Choke S	ize
Tubing	(FOOT)	NGE) Ind Cemen	ting Reco		esting (pitot,					
Sire	·	Feet	Sax							lowed
9-5/	8 * 1	2101	562		Method	-				
7-5/		7921	850	Acid or Frac sand):2000	ture Treatment	(Give amount	s of materials	used, such	as acid, wa	ater, oil, and
Line 5-1/		5801	300	Casino	Tubing Press.	Date f	first new			
					rter Shel 1				•	
Top	of Lin	er • [3703 1		rter Walle		•	-		
Remarks	s: Poto	ntial."	test	•	68 bbls, et					
	- 7P	50 te	100#.	Gas Vol. 2	7,735 CFPD	GCR. 61	6 Gritze	37 <u>.6 Ger</u> .	Supet.	Grude.
		••••••		· · · · · · · · · · · · · · · · · · ·						
I h	ereby ce	rtify that	t the info	rmation given	above is true	and comple	te to the best of	of my knowl	edge.	
Approve	d	<u>100</u>	V LE K	164	, 19	Amerad	ia. Potrolo	. Corper	ation	
						- Fr	l'Call	pany or Ope	rator (
/	OH CO	ONSERV 20	VATION	COMMISSIO	N	By:	v, v a - v	(Signature)	••••••	
By.	1 - K	1	40.11			Title	District			. <u></u>
Uy l	L	\				A 1010	Send Commu	nications reg	arding wel	l to:
Title					• • • • • • • • • • • • • • • • • • • •	Name	Amerada	refreilenn	L COPPOR	

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Address. Bax 668 - Nebbe, Ner Maxies

For N 1 13 71 '63

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