TRIBUTION		
011		
GAS		
E		
	01L 6 4 3	01L 643 2

NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104) Santa Fe, New Mexico

REQUEST FOR (OIL) - ACASE ALLOWAFLE

(Deviation Surveys on Back Side)

New Well

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.

						(Place)		•••••	Octob	(Date)
E ARE	HERE rican	BY RI	EQUESTI	NG AN ALLO 0. J.	WABLE FOR	R A WELL KN ^{#B^{II}} , Well No.	NOWN . L	AS: O _{in}	Nin 1,	
B (Company	or Ope	rator) 22	_т 205	(Lease) R 37B	, NMPM.,		Momimen	t Tubb	•
Unit	Letter			County Dat	e Spudded	6-28-63	Date	Drilling Co	pleted	7-21-63
Pie			ocation:	Elevation	3549" BOB	Tota 641Name	1 Depth	<u> </u>	FBTD	0574*
D	С	В #	A	PRODUCING INT	ERVAL -					
E	F	G	H	Perforations_ Open Hole	6464-657	7 various in Dept Casi	n terva h ng Shoe	1 s 6610†	Depth Tubing	6400*
L	K	J	I	OIL WELL TEST	[-	bbls.cil,				Choke min. Size
M	N	0	P	Test After A	rid or Fractur	e Treatment (aft bls.oil,3	er recove	ery of volume	of oil equ	al to volume of
1991 ng ,(Sure 3-5/8		ind Ceme	onting Record Sax 700	rd Method of Te Test After A Choke Size	sting (pitot, cid or Fractur Method	MCF/ back pressure, e e Treatment: cf Testing:	.tc.);	MCF/	Day; Hours	flowed
4-1/2	• 60	510*	520	Acid on Find	ure Freatment	s ^{(Give} O ^{ampun} 50,°	500 teri	l'oil'& 2	1,075	water, oil, and and & Dead
2-1/2	- 61	•00†		Casing Press.	Tubing Press	Date firs 700 oil run t	t new o tanks	10-1-	63	
				Cil Transpor	ter CR	lf Oil Refi	oleum (Company		
emarks	:				·····	j				
				·····		•••••••••••••••••••••••••••••••••••••••		••••••	•••••	
				ormation given			can Pe	Company or O	OFFOREL	ion
				COMMISSIC		Griginal - By:E	Signed By: M.D.Y	(Signatur	र)	
ly:)	-1 /	//		Sei	nd Comr	nunications i	regarding v	vell to:
litle					• • • • • • • • • • • • • • • • • • • •					
						AddressE	30x 68.		New Mex	100

DEVIATION SURVEYS

Depth	Degrees Off
145	1/2
500	3/4
600	1/4
950	1/2
1608	1_
2000	
2480	3/4 2-3/4 2-1/2
2 545	2-1/2
2650	2-1/4
2760	2-1/4 2-
2870	1-3/4
3110	3/4
3440	3/4
3650	1-
3770	3/4
4370	2-

The above deviation information is true and correct to the best of my knowledge.

V. E. Staley, Area Superintendent

Sworn and subscribed to before me this date the 16th day of October, 1963.

ciste G. D. Durham, Notary Public in and

for the County of Lea, New Mexico.

My Commission Expires: 8-8-64.