NEW MEXICO OIL CONSERVATION COMPLESSION Santa Fe, New Mexico

REQUEST FOR (WIL) - (GAS) ALLOWABLE GOO New Well REXERVENCE

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

			•	Midland, Texas	4-7-55
FARFU	FDFRV DI	r∩i (petin)/		(Place)	(Date)
e Supei	rior Oil	equestin(s an allowable for a second	OR A WELL KNOWN AS:	_
				Well No. 1-12 in W	
L	Sec	12	T. 21. 8 R 35 I	NMPM., Eumont Gas	n
()					
La	14		County. Date Spudded.	6-8-54 Date Completed	7-6-54
Please	e indicate lo	ocation:			
			Elevation 3585		P.B
			Top oil/gas pay	3674 Name of Prod. Form	Seven Rivers
X		-	Casing Perforations	3674 - 90	
				e of Prod. String. 3972	
			Natural Prod. Test	O	3ОР
			based on	bbls. Oil inHrs	Min
		•••••	Test after acid or sh	ot	ВОР
Casing a Size	and Comentia	•	Based on	bbls. Oil in	W
1	Feet	Sax			
9 5/8	312	250			
7	4211	300	Size choke in inches	3/4	
			Date first oil run to	tanks or gas to Transmission system:	nut-in
			Transporter taking (oil or Gas: El Paso Natural Gas (Company
~ · · · · · · · · · · · · · · · · · · ·	(1)	llocation	authorized as per	MMOCC Administrative Order ME	SP-12
marks:	o acte a				
		ober 13,	1954.		
			195h.		
4	ated Oct	eber 13,	•••••	e and complete to the best of my knowledg	
I hereby	certify that	eber 13,	•••••	e and complete to the best of my knowledg	ge.
I hereby	certify tha	t the informa	ation given above is true, 19.55	e and complete to the best of my knowledg The Superior 011 Compa (Company or Operator	ge.
I hereby	certify tha	t the informa	ation given above is true	e and complete to the best of my knowledg The Superior 011 Compa (Company or Operator	ge.
I hereby	certify tha	t the informa	ation given above is true, 19.55	The Superior 011 Company or Operator By: (Signature)	ge.
I hereby	certify tha	t the informa	ation given above is true, 19.55	The Superior 011 Company or Operator By: (Signature) Title. Gas Engineer	ge.
I hereby	certify tha	t the informa	ation given above is true, 19.55	The Superior 011 Company or Operator By: (Signature)	ge.