NEW XICO OIL CONSERVATION COMM ION

Santa Fe. New Mexico

REQUEST FOR (OIL) - (CAS) ALLOWABLE

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 delive ered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

a mu	7 uic 307		••••		Hobbs, New Mexica) 12-12	-58
					(Place)		(Date)
e ari	E HERE	EBY REQ	QUESTI	NG AN ALLOWABLE H	FOR A WELL KNOWN	AS:	
mble	011 &	Refin	ing Cor	apany Hea lexico S		, i n SW	1/4. SW 1/4,
I	Company	y or Oper	ator) ЭΩ	Lea 		ર જ્યાં	Pool
Unit	Letter	, Sec:		., T.21-5, R. 37- Recoupt	etion Degus	Recompletion	
2				County Date Souther	<u>11-30-58</u> Det	completed	1%-10-20
Please indicate location:				Elevation	Total bepth		(10)8
				Top Oil/Gas Pay <u>6625</u>	Name of Pro	d. Form. LPINKard	
D	C	B	A	PRODUCING INTERVAL -			
				Perforations 6625=	66335 66342-6658		
E	F	G.	H	Open Hole	Depth Casing Shoe	6659 Depth Tubing	5620
				OIL WELL TEST -			
L	K	J	I	- 34.	5	phic water in 22 hrs	Choke g
				Natural Prod. lest		un of volume of oil o	, with size
M at	Ň	0	P	Test After Acid or Frac	ture Treatment (after reco	very of volume of oil e	Choke
m	14	Ĭ	-	load oil used):	bbls.oil,bbls	water inhrs,	min. Size
				GAS WELL TEST -			
				Natural Prod. Test:	MCF/Day; Ho	urs flowed Chok	e Size
Mag	Cesing (and Cemen	ting Reco	rd Method of Testing (pit)	ot, back pressure, etc.):	den e	
Size	•	Feet	SAX		ture Treatment:	MCE/Dave Hour	s flowed
<u> </u>							
					hod of Testing:		
				Acid or Fracture Treatm	ent (Give amounts of mater	ials used, such as acid	, water, oil, and
				sand):			
				Casing Tubing Press. Press.	Date first new	12-11-58	
		+		(ii) Transporter (A)][delining declary		
				Sheet.	v oil Company		
	Thi	well	recomp	Gas Transporter	nebry and Urinkard	oil Wells	·····
mark	S		· ·····	••••••••••••••••••••••••••••••••••••••	•••••		
· · · • • • • • • • •			•••••				
					l	est of my knowledge	
				ormation given above is		efining Company	
prov	ed		· · · · · · · · · · · · · · · · · · ·	, 19	••••	(Company or Operator)	·····
					ORIGINAL	R. ALWORTH SIGNED	ARVIN D. EAD
	OIL C	ONSER	VATION	N COMMISSION	By: SIGNED	(Signature)	
	- La	 	Í,		Title		-
	A.	22.4		TYTIC CH	Send Con	munications regarding	well to:
Title				· · · · · · · · · · · · · · · · · · ·		A Refining Comp	
					Name		
					Addres	i - linhos, Nev Me	x100

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

NEX (MAR)

Recompletion