Orig: & 200: OCC 00: PHR JTR F

NE' IEXICO OIL CONSERVATION COM SSION Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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

			Mebbs, New Mexico		June 7, 1955		
WE ARE I	HEREBY I	REOUESTI	NG AN ALLOWABLE F	(Place)		(Dat	e
Sinelair (011 & Ge	s Company	Rey Barton	OR A WELL KNOW	VN AS:	30.0	
Со	mpany or O	perator)	(Leas	, Well No e)	, in	1/4 115	
.	Se	c 23	, T 218 , R 37 I	NMPM	Blimebry		.
Unit							
*	208		County. Date Spudded.		, Date Complete	d 9-16-55 5	4
Pleas	se indicate	location:					
			Floreston 3406				
	•	'	Elevation	Total Depth		, P.B	• • • • • • • • • • • • • • • • • • • •
			Top of gas pay	5592 Name	of Prod For	Rlineber	
			1				
 			Casing Perforations	5592 to 5634	(120 - 1/24	jet shots)	or
	,		Depth to Casing sho	oe of Prod. String	• • • • • • • • • • • • • • • • • • • •		*** **
		,	Natural Prod. Test	5	30 MEP gas		BHH
	İ						
<u> </u>				bbls. Oil in			
_	•		Test after acid or sh	ot	300 MCP gas		BHH
Casing a Size	and Coment Feet		Based on	bbls. Oil in	**		
1	reet	Sax			•		
13 3/8	300	300	Gas Well Potential		6,3100 MC	?	
			Size choke in inches	3/4*			
9 5/8	2802	1000					
5 1/2	7349	575	Date first oil run to	tanks or gas to Transmi	ssion system:		
			Transporter taking (oil or Gas: Permian	Pine Line	Compone	
2	7033		Transporter taking C	on or Gas			
Remarks:			***************************************				
			***************************************			************	
				***************************************		***************************************	
I hereby	certify tha	at the inform	nation given above is true	and complete to the h			
Approved				Sinelair Oi			
••			17		Company or Oper	ator)	
OIL	CONSER	VATION C	OMMISSION	By: 3	27721		
					(Signature)	*****	
By:	·····			Title Dist, Supt		**********	
itle			•••••••••••••••••••••••••••••••••••••••	Send Com	munications rega	arding well to:	
		•	•••••••••••••••••••••••••••••••••••••••	Name Simelair	011 & Clas Co	mberià	
				Address 520 Bast	Broadway, H	lebbs, New _ex	do.