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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

4-0CC 1-Houston 1-Widland

1-File

HOBBS OFFICE O. C. C. New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any bom lifted bil 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 recompletio. 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.

					***			3-10-64		
7 4017	Пере	RV DE	OUTSTIN	IG AN ATT	WARIE EUD	(Place) A WELL KNO	OWN AS:		(Date)	
			-			, Well No		n. 58	1/4 SE	1/4
	Company	or Ope	rator)		(Lease)	, NMPM.,				
	Letter									Pool
L	es			County. Da	ite Spudded	3-7-64	Date Drilling	Completed	2-24- 6673	64
Ple	ease indi	cate lo	cation:	-		Total				
D C	C	В	A		-	Name o	f Prod. Form.	247124 (4	37	
				PRODUCING IN		*** *****	#0 441 # 3 49		#000 #1	39
E F	F	G	Н			1', 5796', Depth				
						Depth Casing	Shoe	Tubing_		
L	K	J	I	OIL WELL TES						Choke
		-		Natural Proc	d. Test:	_bbls.oil,	bbls water	inhrs,	min.	Size
M	- N	0	P			Treatment (after	-		Chok	· .
	"	Ü	-	load oil use	ed): 187 bb.	ls,oil,	_bbls water in	hrs,	min. Size	14/9
				GAS WELL TES	<u> </u>					
	(FOOTAG	E)			d. Test:	MCF/Da	y; Hours flowed	Choke	Size	
•	asing an	d Cemer	ting Record	Method of Te	esting (pitot, b	ack pressure, etc	.):			
Size		ret	Sax	Test After	Acid or Fracture	Treatment:	1	MCF/Day; Hours	flowed	
3-3/	8	334	325	Choke Size_	Method	of Testing:				
B-5,/	3 2	999	960	Acid or Frac	ture Treatment (Give amounts of	materials used,	such as acid,	water, oil	and
-1/	2 6	709	1065			Date first oil run to				
-1/	10 5	941		Cil Transpor	ter Texas	-New Mexico	Pipe Line C	onpeny		
-1/	26 6	412		Gas Transpor	ter Skell	Oll Compan	7			
arks:		Well	is a du	1 oil Bli	ne der-de inti	erd. This f	or blinebry			7,715/7 2,715/7
•••••			Annual Annual Services				(4)	1		
ort ,	Gvty.	38.6	, cor a	14/14 Bah	er Model "V	Packer set	9 6400	*********		
I her	reby cert	tify tha	the infor	mation given	above is true	and complete to	the best of my	nowledge.		
					, 19	394	idewater Oi (Company o	2 Company		
	*					<u>9</u>	riginal Si	igned by		
(OK CC	NSER	VATION	COMMISSIO	NC	By:	G. L. Sign	ADE		
1	4					Tirle .	rea Superia	tendent		
J.,,	<u> </u>					Send	Communication	ns regarding	well to:	
e	•	•••••				NameC	. L. Made			
						Acidress	ox 249, Hob	bo, Hew M	Prico	