## NEW XICO OIL CONSERVATION COMM. ON Santa Fe, New Mexico



CCC

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

				Denver City, Texas (Place)	May 16, 1958 (Date)
WE ARE	HEREBY	REQUESTI	NG AN ALLOWABLE	FOR A WELL KNOWN AS:	
(0	company or	Operator)	(Lea		
P	Letter		., T <b>22–5</b> , R <b>3</b> 6	-E , NMPM., South Eunice	Pool
Lea			County. Date Spudded	i l=27-58 Date Drilling Comple	ted 5-15-58
Please indicate location:		Elevation 3185	Total Depth <b>3800</b>	_PBTD <b>3800</b>	
	C	BA	Top Oil/Gas Pay_3638	Name of Prod. Form. Seve	n Rivers
			PRODUCING INTERVAL -		
E	F		Perforations 3752-37	60: 3711-3728: 3699-3704: 3654-	3666; 3634-3642
Ŀ	_	Э. Н <sup>-</sup>	Open Hole	DepthCasing Shoe_3292.64	Depth Tubing 3694.87
	<b>X</b>		OIL WELL TEST -		
L	K	J   I		bbls.oil,bbls water in	Choke
	ĺ			ture Treatment (after recovery of volume of	
M	N	) P		bbls,oil,bbls water inhr	
				bbis,oii,bbis water innr	s, <u>V</u> _min. Size_ <u>11/01</u>
l	i	<b>.</b>	GAS WELL TEST -		
			_ ·	MCF/Day; Hours flowed	
Tubing ,Ge Sire	ising and G Feet	ementing Recor Sax	Method of Testing (pito	t, back pressure, etc.):	
			ture Treatment:MCF/Day;		
7-5/8	365	300	Choke SizeMeth	hod of Testing:	
			Acid or Fracture Treatme	ent (Give amounts of materials used, such as	acid, water, oil, and
1-1/2	3292.0	<u>6 1100</u>		i 25000 gals, oil	
			Casing Tubing	Date first new	~o
2"	3694.1	57	7	150 oil run to tanks May 20, 19	
				Pipe Line Corp. Box 1910 M	Idiand, Teras
Permarke ·	Contra	t is help	Gas Transporter <u>None</u>	a sale of casinghead gas	······
Nelliarks		«.x	<b>9</b> 48257.248.8894.98		•••••••
••••••	•••••••••••••••••	••••••			
T here	hu cartifu	that the info	mation given above is to	ue and complete to the best of my knowledg	76
Approved.		MAY 22 1			
sphroved.	••••••		, 17	(Company or Operate	
O	IL CONS	ERVATION	COMMISSION	By: Marci Caral	·····
	6	7	1	N.A. Carr (Signature)	
By:	Jef 1	- co	UUN /	TitleDistrict.Superintenden	
r:	Entime	· District 1		Send Communications regard	ding well to:
		••••••••••••••••••••••••		Name	Company
				Address Box 1038 Denver Ci	

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