NEW XICO OIL CONSERVATION COMM ON Santa Fe, New Mexico

(Form C-104) Revised 7/1/57 41.79

REQUEST FOR (OIL) - XXXXXX ALLOWABLE

New Well

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.

| | | | | Eunice, New Mexico | | | 3-7-58 | |
|---------------------------|----------|--------------|--------------|---|-------------------------------|--------------------------------|---|--|
| A'E ADE | e Medi | FRV D | FOLIFSTI | NG AN ALLOWABLE FO | (Place) OR A WELL KNO | WN AS: | (Date) | |
| | | | - | | | | SE /4 SW /4, | |
| | Compan | | | (Lesse) |) | | /4, | |
| Unit | Letter | | | - | | | Pool | |
| | L | 68 | | County. Date Spudded | -2-10-58 | Date Drilling | Completed 2-21-58 | |
| Please indicate location: | | | | | | - | PBTD 3774. | |
| D | С | В | A | Top Oil/Gas Pay 3650 | Name of | Prod. Form. 56 | or SWR-Lowelloor | |
| | | | ′ | PRODUCING INTERVAL - | | | | |
| E | F | G | H | Perforations 3650-60 | 3671-83.51 Depth | 3712-181 37 | 726-36' | |
| ٦ | | | " | Open Hole | Casing | Shoe 3774 | Tubing | |
| | | | | OIL WELL TEST - | | | Chala | |
| L | K | J | ' ·I | Natural Prod. Test: | bbls.oil, | bbls water in | Choke | |
| | | | | Test After Acid or Fractu | re Treatment (after | recovery of volum | me of oil equal to volume of | |
| M | N | 0 | P | load oil used): 73 | bbls.oil, 65 | bbls water in | Choke 8 hrs, min. Size 21/64 | |
| | X | | | GAS WELL TEST - | | | | |
| | | <u> </u> | <u>-</u> | | MCE /D- | Union floured | Choke Size | |
| bd m.a. | Contra | and Come | nting Recor | | | | | |
| , Size | • | Feet | SAR | | | | C/D Nama Flavid | |
| | | | | 1 | | | F/Day; Hours flowed | |
| B 5/ | /B 3 | 85 | 350 | Choke SizeMetho | d of lesting: | | | |
| 1 | , l | | 3.050 | Acid or Fracture Treatmen | t (Give amounts of m | aterials used, su | uch as acid, water, oil, and | |
| 5 1/ | 2 3 | 774 | 1050 | sand): 1000 gals acid, 24,000 gals arude, 24,000# sund, 1200# Ademit Casing Tubing Date first new | | | | |
| | | | | Casing Tubing Press. 800 Press. | Date first n 300 oil run to t | new anks <u>3-6-58</u> | | |
| | | | | | | | | |
| | | | | Gas Transporter | | - | | |
| emarks | LC | 0303 | L33b | | | | | |
| .11161 50 | J | | | | | | *************************************** | |
| **- | | | •••••••• | ••••• | | | ••••• | |
| T h | ereby ce | ertify th | at the info | rmation given above is tru | e and complete to t | he best of my kno | owledge. | |
| | | | | , 19 | | nental Oil (| Company | |
| prove | ······ | | | , | 111 | (Company or | Operator) | |
| | OIL C | ONSE | VATION | COMMISSION | Ву: \ | Jaker | | |
| | 4 | | 11 | · // . | | (Signatu | | |
| : | <u> </u> | k 12 | -/6 | cker | Title Distri | ct Superinte Communications | regarding well to: | |
| tle | ····· | | | | Name Mr. J | | <u> </u> | |
| | | | | | | | ew Mertino | |
| | | | | | Address. BOX. O | 8, Eunice, N | en Lievion | |