NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

REQUEST FOR (OIL) - (CANS) 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 hew oil is delivered into the stock tanks. Gas must be reported on 15.025 peia at 60° Fahrenheit. Jal, New Mexico 11-9-59 (Place) (Date) WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: (Company or Operator) (Lease) P. Sec. 1. T. 235. R. 36E. NMPM., Langlie Mattix Pool Lea County. Date Spudded 10-19-59 Date Drilling Completed 10-31-59 Elevation 3395.5 GL Total Depth 37451 PBTD 37421 Please indicate location: Top Oil/Gas Pay 5.5 DF Name of Prod. Form. Queen D C В A PRODUCING INTERVAL -Perforations 3620-30 3638-46 3650-62 3666-92 3698-3728 Έ F G H Open Hole Casing Shoe 37 ht 351.51 Tubing OIL WELL TEST -L K J Ι Choke Natural Prod. Test:_____bbls.oil, _____bbls water in _____hrs, ____ min. Size___ Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of ۰P M N 0 load oil used): 45 bbls.oil, 0 bbls water in 5 hrs, min. Size 24/64 GAS WELL TEST -

MCF/Day; Hours flowed _____Choke Size Natural Prod. Test: Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):_____

Size Feet Sax Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed Choke Size Method of Testing: 8 5/8 291 200 + 2550 sx Pormin or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 눳 3738 50 sx Latex Ball Lealers 23,000 gal Lease Oil + 23,000 gal sd. 70 sand): Date first new Casino Tubing 11-9-59 Press. oil run to tanks Press. Texas-New Mexice Pipeline Company Oil Transporter 2* 3516 Phillips Petroleum Company Gas Transporter

Remarks:

NW SE SE

Top Cement 1160'

..... I hereby certify that the information given above is true and complete to the best of my knowledge.

(Company or Operator) uncy Matom By:..... OIL CONSERVATION COMMISSION (Signature) <u>Alla</u> Title Engineer Send Communications regarding well to: Title _____ Name Olsen Oils, Inc.

Address Box 691 Jal, New Mexico