NEW M ICO OIL CONSERVATION COMMIS N Santa Fc. New Mexico

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

REQUEST FOR (OIL) - (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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fabrenheit.

E ARE H	EREBY R	EQUESTI	NG AN ALLOWAR	ILE FOR A '	(Place) WELL KNOV	VN AS:		(2=)
				(and apply)				
	207		., T 23-8 , R.					
Unit int			County. Date Sp	udded9/21	/60	Data Drilling C	capleted	10/3/60
	e indicate l		Elevation		ت∂لد LEJOi ميت سد			- 5134
D	C B	A	Top Oil/Gas Pay producing interva		BBIR9 C.1		VOR ALV	
			Perforations	692-3700	36 93-3626,	3714-3723,	3716 21	
E	FG	H	Open Hole		Casing S	^{hce} 3775	Tubing_	
			OIL WELL TEST -					Chok
L	K J	I	Natural Prod. Tes	st:bb	15,011,	obls water in	hrs,	min. Size
V	N O	P	Test After Acid	or Fracture Tre	arment (after :	necovery of volu	me of oil eq	ual to volume o Choke min. Size
M			load oil used):	.75	···35		8	
			GAS WELL TEST -					Circ
			Natural Proc. Ter	st:	PCF/Iav	: Hours flowed _	Choke	5120
ubing ,Ca		menting Reco	Method of Testin					
Size	Feet	Sax 	Test After Acid					
8-5/8	308	300	Choke Size					
			Acid or Fracture	Treatment (Giv	e empuris (i m	aterials used, s	uch as a c id,	water, oil, an
5-1/2	3765	250	sand): SOT w/ Casing Fress. 2700	0,000 gal.	lesse oi]		mite à 1	0,000/ sand
2	3692		Casing Fress. 2700	_Press	oil run to t	anks10/7/6	0	
		+	Oil Transporter	ferras-New J	ieries Pipe	line		، همچنی برین ایست که این کسی میرین ایست و این ا
			Gas Transporter	hillips P	troleum Ge	mpany		
lemarks:.	Vibre-fr	aned 36	93-98 x/1#4 .eh	arge & 371.	5-21 ×/1 #	eharge	••••••	
		····						
• • • • • • •	• * •	•••••	تر المحمد ال محمد المحمد ال	••••••••••••••••••••••••••••••••••••••	· · · · · · · · · · · ·	he hast of my les	nowledge.	
I her	eby certify	that the in	formation given abo	ove is true and	l compièté to t	ne best of my K	ionicage.	
Approved.		•••••) }	, 19	Peccas Paci:	Company of	Operator /	TA .
C	DIL CONS	ERVATIO	N COMMISSION	В	Ŋ	(Signa	ture)	
By:	lu	4 UNS	Mall.	1	Send	Communication	s regarding	well to:
Title			·		-	Pacifie Co		Company