## NUMBER OF COP \_B RECEIVED CISTRIBUTION BANTA FF FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE OPERATOR

## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

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

## REQUEST FOR (OIL) - MAKE ALLOWAPLE

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.

rea in	to the	stock tank	is. Qan mi	ust be reported on 15.025	Hobbs (Place)	lev Head	.00	Septemb	(Date)
CE AD	E HE	RERV RI	FOLIEST	TING AN ALLOWABLE	, ,	KNOWN	AS:		, , , ,
Call	047	Comore	tion	Alice Paddock	Well N	io 1	in	SW 1	4 <b>SE</b> 1/4
	Comp	any or Ope	erator)	(L	ease)				
			1	T 22-8 R	7-8 , NMPM.,	Bline	<b>D</b>		Pool
-	t Latter						re	complete	d 8 <b>-27-62</b>
				County. Date Spudd	led	Date And Dank	Kalia Ramana	DDTD	
l	Please indicate location:			Elevation 3356					
D	C	В	A	Top Oil Pay 5	NarNar	me of Prod	. Form.	A SERVICE OF	
	١			PRODUCING INTERVAL -					
	<u> </u>			Perforations 5700	<b>5688</b> , 5639	5. 5618	5600 &	55761	
Ē	F	G	H	Open Hole					5238
				1					
L	K	J	Ī	OIL WELL TEST -					Choke
n	"		1 -	Natural Prod. Test:	bbls.oil,	b	bls water in	hrs,	min. Size
		1		Test After Acid or Fr	racture Treatment (a	fter recov	ery of volum	ne of oil eq	ual to volume of
M	N	0	P	load oil used): <b>237</b>	bbls,oil, 0	bbls	water in 2	hrs,	min. Size 23/64
	1	•					<del></del>		
	<u> </u>			GAS NELL TEST -					
660	PSI.	1980 F	<b>3</b> L	Natural Prod. Test:	MC	F/Day; Hou	rs flowed	Choke	Si ze
tubing	,Casin	g and Ceme	nting Rec	ord Method of Testing (pi	itot, back pressure,	etc.):			
Su	te	Feet	Sax	Test After Acid or Fi	racture Treatment:		MCF	/Day; Hours	flowed
				Choke Size					
13-3	/8"	313	300						
9 4	/8"	2883	975	Acid or Fracture Treasand): 300 sel 15	tment (Give amounts	of materi	als used, su	ch as acid,	water, oil, and
0-2	/0-	8003	712						9 94 993
<i>-</i>	400	5843	600	Casing Tubi	ing <b>5000</b> Date fi	rst new to tanks	8-27-62		2-37 020
5-1	/4-	2043	000	Oil Transporter					
9_2/	20	5238	ļ	·					
2-3/				Gas Transporter					
Remar	ks : I	hal co	pleted	Blinebry eil with	existing Padd	ock of T			
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									***************************************
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pprov	red		······	, 19		· ((	Company or	Operator)	e.
				co./////cc.o.	<b>D</b>	6/2-1	10 x 1	1.26	
	OIL	CONSE	RVATIO	ON COMMISSION			(Signatu	ire)	
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Tiels .					Name	wlf 011	Corpora	tion	
3111	••••••						99.45. t	<b></b>	•
					Address	MX ZIAT	, Hobbs,	Nov. Fight	7 do