NEW TXICO OIL CONSERVATION COMM TION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) 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-104 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

				Midland, Texas (Place)						
Opera	tors Ser	vice Co	ING AN ALLOWABL				NW !/	. NE	1/4.	
	mpany or Op Sec ster	-	, T. 22S , R 3	Lesse) 7.E, NMPM.,	Lang	lie-Ma	tix	Po	ool	
Lea Please indicate location:			Elevation 335	0 Tot	al Depth	3731	PBTD	3689		
D	СВ	A	Top Oil/Gas Pay 3	. Nam	ne of Prod. F	orm	enrose.	· <u>·</u>		
E	F G	H	Perforations 3	560' to 36 84' Dep		3727!	Depth Tubing	35501		
L	K J	I	OIL WELL TEST - Natural Prod. Test:	O bbls.oil,	0 bbls	water in	6 hrs,	Chol min. Size	«e •_S₩	
M	N O	P	Test After Acid or F	racture Treatment (af	ter recovery	of volume	of oil equ	al to volume o	of	
thing ,Casing and Cementing Recor Size Feet Sax 7-5/8 364 125 4-1/2 3727 100		Method of Testing (F Test After Acid or F Choke Size	MCF ritot, back pressure, racture Treatment: Method of Testing: atment (Give amounts of	etc.):	MCF/	Day; Hours	flowed			
	3121	200	Press. 420 Pre	mud acid: 15 0 ing Date fir: ss. 720 oil run :	to tanks	4-8-59			_ ga	
marks:			L .	kelly-Gil-Comp	ery"					
proved			ormation given above i		tors Ser (Com	vice Ge	ompany erator)			
				Title E i		(Signature) 			
e	·····	••••••		 Name Op	erators	Service	Gempa	ny	-	
				Address 20	01 West	Bldg	Midland	. Тежая		