NEW XICO OIL CONSERVATION COMM ION 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-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.

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_				(P	lace)			(Date)	•••••••
			ING AN ALLOWA						
Wester	mpany or O	LI Gas Ce	Mpany	Matkins , ,	Vell No	2, in	NE	1/4S	!⁄4,
I	inpany or O	, 15	, T 23-S , I	(Lease) 5 36-E 5134	Lan	vlie Matt	f v		
Lea			Elevation	pudded 4-25-	-60 Dat	• Drilling G	mpleted	5-4-60	
Pleas	e indicate	location:	Elevation33	570.7 G.L.	Total Depth	3650	PBTD	364	8
D		•	Top Oil/Gas Pay_	3610	Name of Prod	. Form	Queens		
	СВ		PRODUCING INTERV						
					6_16				
E	G	H	Perforations	3610-20; 363	Depth	2619	Depth	3585	
			Open Hole	······································	Casing Shoe_	3040	Tubing	2202	
L	K J		OIL WELL TEST -						
	K J	I X	Natural Prod. Te	st:bbls.c	il, b	bls water in	hrs.	min.	Choke Siże
				or Fracture Treatme					
M	NO	P		<u>360</u> bbls.oil,			•	OL - 1	
					DD15	water in	<u> </u>	min. Size	
		ليستعد	GAS WELL TEST -						
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Size	ing and Gem Feet	enting Record Sax	rd Method of Testing		sure, etc.):				
Size	Feet	Sax	Method of Testing	g (pitot, back pres	sure, etc.):	MCF/			
Size			Method of Testing Test After Acid of Choke Size	g (pitot, back pres or Fracture Treatme Method of Testi	sure, etc.): nt: ng:	MCF/	Day; Hours	flowed	
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(File the original and 4 copies with t	he appropriate district office)
CERTIFICATE OF COMPLIAN TO TRANSPORT OIL AN	
Company or Operator Western Natural Gas	Company Lease Matkins
Well No. 2 Unit Letter I S 15 T	23 R 36 Pool Langlie-Mattix
County Lea Kind of Lease	(State, Fed. or Patented) Patented
If well produces oil or condensate, give locat	ion of tanks:Unit P S 15 T 23 R 36
Authorized Transporter of Oil or Condensate	Texas-New Mexico Pipe Line Company
Address 221 N. Colorado, Midland, Texas	
(Give address to which approved	copy of this form is to be sent)
Authorized Transporter of Gas Negotiating	for sale of casinghead gas
Address	
(Give address to which approved If Gas is not being sold, give reasons and als See above. Presently flared.	
Reasons for Filing: Please check proper box)	
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership ()	Other (X)
Remarks:	(Give explanation below)
Request permission to co-mingle oil production from our Matkins #1, Jalmat gas into common tank battery.	
mission have been complied with.	
Executed this the 17 day of May	19 <u>60</u>
	By Vane Nord ward
Approved19	Title Office Manager
OIL CONSERVATION COMMISSION	Company WESTERN NATURAL GAS COMPANY
By for thampy	Address 823 Midland Tower
Title	Midland, Texas