## NEW MEXICO OIL CONSERVATION COMMISSION 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 difficultie 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.

(Con	npany or Op	erator)	ieral Henegen '	(Lease)	., Well No	le-X Delev	n <b>re</b>	/ <b>4</b>
Unit Let	, 5ec		, T <del></del> , R	, !	NMPM.,		•••••••	P
Please	indicate		County. Date St	oudded	Total Dept	to Drilling C	completed PBTD	6-6-61 49 <b>6</b> 0
n   /	В	- T - A	Top Oil/Gas Pay_	49031	Name of Pr	od. Form. De	lamro	<del>··</del>
D   C		A	PRODUCING INTERVA	<u> -</u>				
			Perforations S	and Drill		3:		
	r   G	Н	Open Hole	luin-e	Depth Casing Sho	e <b>4990</b>	Depth Tubing	4495
			OIL WELL TEST -					
. 1	J	I		n+• hh	le oil	bble water in	h	Cho
- 1			Natural Prod. Tes					
1 1	1 0	P	Test After Acid				•	Choke
1		•	load oil used):	75_bbls.o	il, <u> </u>	s water in 🔐	hrs,	min. Size
			GAS WELL TEST -					
·			_ Natural Prod. Tes	st:	MCF/Day; H	ours flowed	Choke	Size
ing Casi	ng and Cem	enting Reco						
Size Feet Sax			Test After Acid					
2 2 42	#4# 000		7		<del></del>		/ Day; nours	Tlowed
8-5/8	567	200	Choke Size					
4-1/2	4980	150	Acid or Tracture	Treatment (Give	amounts of mater	rials used, suc	ch as acid,	water, oil, ar
			Acid or recture Treatment (Give amounts of materials used, such as acid, water, oil, a Acid ised w/00 gal must acid sand): Practure treatment 500 gal galled lease oil 1-1/2#(16-2					
2-3/8	4895	ł	Casing 100 Press.	Tubing Press.	Date first new	6-20		
			Oil Transporter		_		<del></del>	
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I hereby	certify th	at the info	ormation given abov	ve is true and	complete to the b	est of my kno	wledge.	
roved		-3	······································	19	Gulf Oil Co	rporation.	••••	
			·		$n_l$ $n_l$	(Company) or (	perator)	
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