## NEV (EXICO OIL CONSERVATION COM<sup>\*</sup> "SION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (CAS) ALLOWABLE

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.

	-	-	•		Hobbs	New Mer	d.co -	December	r 23, 1957
					(Place)	)			(Date)
		-	NG AN ALLO						
			Harri	/1	. \				
*E*	Sec.	<b>9</b>	, T. <b>235</b>	, R. <b>371</b>	, NMPM	Lang	zlie-Matti	x	Pool
Unit Letter Lea Please indicate location				· · · · ·	11/14/19	5 <b>7</b>			11/25/1957
			Elevation	3319'	D.F.	 Total Depth_	3630	PBTD	
			Top Cil/Gas P	ay 3480	) <b>t</b> ;	Name of Prod	. Form	Jue <b>m</b>	_
D	СВ	A	PRODUCING INT	ERVAL -					
			Perforations_	Perfora	ted Interv	rals 3480	-36231		
E	F G	H	Open Hole			Depth Casing Shoe_	36291	Depth Tubing	33631
			OIL WELL TEST	-					
L	K J	I	Natural Prod.	Test:	bbls.oil,	b	bls water in	hrs,	Choke min. Size
									al to volume of
M	NO	Р							Choke 1 min. Size
			GAS WELL TEST	-					
19801	PHL & 760	FWL	- Natural Prod.	Test:	٨	MCF/Day; Hou	rs flowed	Choke	Size
Tubing ,Ca	sing and Ceme	nting Recor	-		, back pressure				
OD Size	Feet	Sax							flowed
8-5/8"	Set At 3721	250	1		d of Testing:_				
			Acid or Fractu	ure Treatmen	t (Gi <del>ve</del> amount	s of materia	als used, suc	h as acid, h	water, oil, and
5-1/2"	36201	200							. Lease 011
			Casing Press.	Tubing Press.	80₩ Date f 	irst new In to tanks	December	22, 19	7
					Pipeline				
			1		y Oil Comp				
		•••••••••••••••••••••••••••••••••••••••	·····						
	Flowed 30	barrels	eil in 24	hours th	rough 1/2"	choke,	T.P		
					•••••••				
			rmation given a			SKALT	t of my know Oil Compa	vledge. <b>ny</b>	
pprovea		••••••		, 19	••••••	( <b>C</b>	Company or O	perator)	
0	IL CONSER	VATION	COMMISSION	r	By:	••••••		· · · · · · · · · · · · · · · · · · ·	·····
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itle		•••••			Name	Skally	0il Compa	-	
							•••••		60
					Address	DUL 70	- Hobbs,	NOW PICKL	~