N. ICO OIL CONSERVATION COMM! Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE New Well

N

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 QUADRUHLICATE 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.

						••••••	Octobe	r 29, 1959
E ARE I	IEREBY R	EOUESTI	NG AN ALLOWA	(Pla) RLE FOR A WEI	•	45.		(Date)
elhi-T	aylor Cil	Corpor	ation Cline	-Foderal W	ell No. 4		NV I	SV 1/2
	mpany or Op	crator)		(Lease)				
Unit Le	, Sêc		., T 235 , R		M., Lang	LIC-MATTI		Poo
Lea	۰ • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	County. Date Sp	udded Sept. 22	1959 Dat	• Drilling C	ampleted 0	et. 4, 1959
Plea	se indicate l	ocation:		1294 DF				
D	СВ	A	Top Oil/Gas Pay	3560	Name of Prod	. Form. Pe	HI OBC	
			PRODUCING INTERVA	-				
E	F G	H	Perforations	3564 - 3578*	3616 - 3	6401		
2			Open Hole	None	_Casing Shoe_	3680	Depth Tubing	3522
	V T		OIL WELL TEST -	No test pri	on to tra	a taont		
L	K J	I	Natural Prod. Tes	t:bbls.oil	l,b	bls water in	hrs,	Choke min, Size
•				r Fracture Treatment				
M	NO	Р	load oil used):	204 bbls.oil,	0 bbls	water in 24	hrs, O	Choke 12/
				Not applicabl				
Size 8-5/8	Feet 594	Sax 300	Test After Acid o	(pitot, back pressur r Fracture Treatment Method of Testing	:	MCF/		
	554	300	┥ <u>╼╼╼</u>					
5-1/2	3669	300	sand): 90.000	reatment (Give amou Gallens lease 20-40 send	-	<u>ت</u>		
2-3/8	3522		Casing Press. 1100	Tubing Date Press. 980 oil	first new run to tanks_	Octobe	r 25, 19	59
				Texas-Nev He			-	
			Gas Transporter					
emarks :						•••••		
						••••••		••••••
	••••••••••••••••••				•••••		• • • • • • • • • • • • • • • • • • • •	•••••••••••••••••••••••••••••••••••••••
I hereb	y certify th	at the info	rmation given above					
pproved	N	October	1	9 59 DELJ	II-TAYLOR (C 1 9	ompany or O		
OI	L CONSER	VATION	COMMISSION	By:	, A	Hellen.	<u>/</u>	
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:	<u></u>	l'het f	<u></u>	Title	Send Comm			ll to:
tle					Delhi-Tay			
		•			Box 1821,	Midland.	Teres	
				Address.				