0					
			NE	EW * "XICO OIL CONSERVATION COMMY" ION	(Form C-104) Revised 7/1/57
				Santa Fe, New Mexico	
			REQ	UEST FOR (OIL) - KGHSS) ALLOWABLE U Hobd s off	
				by the operator before an initial allowable will be assigned to any sompleted	Oil or Gas well.
				QUADRUPLICATE to the same District Office to which Form C-101 was so A.M. on date of completion or recompletion, provided the form is killed	
				ction. The completion date shall be that date in the case of an oil well when st be reported on 15.025 psia at 60° Fahrenheit.	new oil is deliv-
ered int	to the s	INCK GAILK	5. V 23 mus	in the reported on 15.025 pin at 00 Tantenick.	8, 1958
				(Place)	(Date)
				NG AN ALLOWABLE FOR A WELL KNOWN AS: any Saves A-19, Well No. 10, in 35, j	2 SE 1/2
	(Compa	any or Ope	rator)	(Lesse)	••••
	Letter	, Sec		., T.269 , R. 274 , NMPM., Jalmat	Pool
Lei	9			County. Date Spudded. 2-27-58 Date Drilling Completed	
I	Please i	ndicate [,] lo	cation:	Elevation 2948 DF Total Depth 3255 PBTD Top Oil/Gas Pay 3156 Name of Prod. Form. Yates	
D	C	В		PRODUCING INTERVAL -	
E	F	G	H	Perforations 31.56-64', 31.74-82' Depth Depth Casing Shoe 3255 Depth Tubing	3174
				<u>OIL WELL TEST</u> -	
L	K	J	I	Natural Prod. Test:bbls.oil,bbls water inhrs,	Choke min. Size
				Test After Acid or Fracture Treatment (after recovery of volume of oil equ	al to volume of
M	N	0	P X	load oil used): 61 bbls.oil, 37 bbls water in 24 hrs,	_min. Size Open
				GAS WELL TEST -	
				Natural Prod. Test:MCF/Day; Hours flowedChoke	Size
_	•	r and Ceme Feet	nting Recor Sax	rd Method of Testing (pitot, back pressure, etc.):	
Sir				Test After Acid or Fracture Treatment:MCF/Day; Hours	
8 5	/8	379	300	Choke SizeMethod of Testing:	
5 1	/2	3255	935	Acid or Fracture Treatment (Give amounts of materials used, such as acid,	
				sand): 3000 gals acid. 8000 gal sandfrag Casing Tubing Date first new 4-7-58 Press: 50-125 Press oil run to tanks 4-7-58	<u></u>
				Press: 30-125 Press oil run to tanks 4-7-76 Oil Transporter Shell Pipe Line Corporation	
				Gas Transporter Vented to air	
↓	 1.1	C 0301	684	Gas Transporter Versou 60 all	
Remark	<u>نام :</u>	• • /• /•			
	••••••	•••••	••••••		
	hereby	certify th	at the info	ormation given above is true and complete to the best of my knowledge.	
Approv	ed	2 y	14 195	10 CONTINENTAL OIL COMPANY	•••••••••••••••••••••••••••••••••••••••
••					
	OIL	CONSER	VATION	COMMISSION By: (Signature)	···
R.	E.	, 17	-i	Title District Superintenden	£
ыу:	···•••••	T	- N-a +	Send Communications regarding,	ell to:
Title				Name Mr. J. R. Parker	
				Address Box 68, Bunice, N.N.	