4 - OCC

1 - Houston 1 - Midland

NEW MEXICO OIL CONSERVATION COMMISCION

Santa Fe, New Mexico

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

1 - File

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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

						Place)			(Date)
Tidewater Oil Company				IG AN ALLOWABLE FOR A WELL KNOWN AS: L. M. Buffington "C", Well No. 1-D in SW (Lease)					
. M		Sec	18.	, т 25S , F	38E , N	MPM., Just	is-Blin	ebry	Poo
			location:	County. Date S	pudded 8-20-66 3089 D.F.	Date	Drilling (Completed FBTD	10-1-60 6004*
				Top Oil/Gas Pay_	5237	Name of Prod	Form.	Blinebr	У
D	C	В	A	PRODUCING INTERV					
		ļ		Perforations	5237-5 2, 52	64-71, 5286-	90, 5366	-71, 5394	-98'
E	F	G	H			Depth Casing Shoe_			
				OIL WELL TEST -					
L	K	J	I	Natural Prod. Te	st: bbls	s.pil,b	bls water i	nhrs,	Choke min. Size_
						ment (after recov			
M	N	0	P	load oil used):	83 bbls.oil	, 45 Phis	water in 9	hrs,	Choke Omin. Size 2
1-D				GAS WELL TEST -					
		J					5)	Ch I	Ci
						MCF/Day; Hou			
ubing ,0 Size		and Cem Feet	enting Recor			ressure, etc.):			
5076		100		Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Method of Testing:					
3-3/8	в !	541	550	Choke Size	Method of Tes	sting:			
				Acid or Fracture	Treatment (Give	amounts of materi	als used, s	uch as acid,	water, oil, and
9-5/8	8 3	401	1100	sand): 1000 ga	1. Reg. acid	i, 10,000 gal	. Ref.	oil, 44,00	00# sand
5-1/2	2 6	070	640	Dross Des	Tubing Press. 0-150	oil run to tanks	10-1	17-60	
				Gil Transporter	Texas-Nev	Mexico Pipe	line Co.	•	
2-3/	8 5	129			None				
emarks									
							•••••	***************************************	
							*******	**.*.	
I he	reby c	ertify t	hat the info	rmation given abo	ove is true and c	omplete to the be	st of my kn	iowledge.	
						lidewate	I OIL C	Ompany	***************************************
-p. 5.00				MAN /		(•	Company or Original	Operator) Signed By:	
	OIL C	CONSE	RVATION	COMMISSION	B y:	••••••		ED	
11	1/1	14	1/11/1	hij ///		e Area Suj	(g		
(A)	[[.]	2//6	4/14/14		Titl	Send Com	nunications	s regarding v	vell to:
itle	-		//			Thomas	s E. Wea		
		, /				H			
					Add	ress. Box	47, Hob	DS, N. Me	X •