NEW 3 XICO OIL CONSERVATION COMMIS ON 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 G-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed Bring 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.

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				(Place	e)			(Date)	
		•	NG AN ALLOWAB	I INCA			. Tables	300	
Tennes	company or Ope	ANSIILSAI rator)	ion Company G.	E. JOPUSH, Wel (Lease)	ll No	, in	AS	1/4	1/4,
c``	Sec.	15	T 25-8 R		d. Un	lesignate	đ	*********	Pool
Unit 1	Letter								
· · · · · · · · · · · · · · · · · · ·			County. Date Spu	dded 10-31-00 42' GL	Total Danth	Drilling Co	mpleted	11-11-0	<u></u>
Ple	Please indicate location:			46941					
D	C B	A			_Name of Frod	rorm.			
	x		PRODUCING INTERVAL						
E	F G	H	Perforations		Depth	l Ones	Depth	1 6000	
			Open Hole	· · · · · · · · · · · · · · · · · · ·	_Casing Shoe	4850	Tubing_	46001	
	KJ	 	OIL WELL TEST -					,	Ch also
L	A J	I	Natural Prod. Test	bbls.oil	, <u> </u>	ols water in	20 hrs,	O min.	Choke Size
				Fracture Treatment					
M	N O	P	load oil used):	bbls.oil,	- bbls	water in	_hrs,	Choke min Size_	<u> 12/</u> 6
İ			GAS WELL TEST -						
			Natural Prod. Test:		MCF/Day: Hou	rs flowed	Choke	Size	
Tubing Co	asing and Come	nting Reco		(pitot, back pressu					
Size	Feet	Sax	_	Fracture Treatment					
			1	Method of Testing			-47,		
7 5/8	3541	125	-						
4 1/2	· 4850·	150	Acid or Fracture Tr	eatment (G ive amour	nts of materia	ls used, suc	h as acid,	water, oil,	and
			sand):	Dodo.	ff-at nam			 	
2 3/8	2 3/8" 4600'		Casing To	oil in the state of the state o	run to tanks	November	15. 19	60	
			Oil Transporter	Cactus Pet	roleum, I	1e			
ļ <u> </u>			Gas Transporter		·	· · · · · · · · · · · · · · · · · · ·			
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		••••	•••••	*****************************		******	************		
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I her	eby certify tha	at the info	ormation given above	is true and compl	ete to the bes	t of my know	wledge.		
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	<i>~</i> ;	,	,		$n > 1 \sim 2$	ompany or O			
ç	OH CONSER	VATION	COMMISSION	Ву:	wza	1 Signatur	.	WLan	g
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Title	<i>[</i>	<i></i>	» .						ar.
	1/			Name	Tennessee	GES TIND			J
				Address.	Box 307,	.Hobbs , N	ev Nexi	BO	