NEW-MEXICO OIL CONSERVATION COMMESSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well

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.

| | | | | (Place) | September 18, 195 (Date) |
|---------------------------|---|---------------------|--|--|-----------------------------|
| | | | | FOR A WELL KNOWN AS: | |
| (Company or Operator) | | | J.W. Sherr | 11, Well No7, i | n |
| j | Sec | | | 78, NMPM.,Langlie-M | attiv Doo |
| - | | | | | |
| Please indicate location: | | County. Date Spudde | d.August 14, 1957 Date Drilling | Completed September 1, | |
| | | location: | Top Oil/Gas Pay 3501 Name of Prod. Form. | | |
| D | C B | A | PRODUCING INTERVAL - | | |
| E | F G | 177 | Perforations 3504 | -35091, 3511-35181, 3530-35 | tét . |
| - | F G | H | | Depth Casing Shoe | |
| L | KJ | I | OIL WELL TEST - | | |
| " | * x | | Natural Prod. Test: | bbls.oil,bbls water | Choke in hrs, min. Size |
| M | N O | P | | cture Treatment (after recovery of vol | Chales |
| | i | | GAS WELL TEST - | bbls.oil,bbls water in | hrs,min. Size |
| Size | Set At | 500 | Choke SizeMe | thod of Testing: | |
| 5-1/2* | 35541 | 200 | sand): 5,600 (1a) | s. Sandoil mired la gand we | r galles |
| | | | Gil Transporter Texa | s & Merr Mexico Pipeline Com | pany |
| | | | | ase Natural Gas Company | |
| emarks: | unped 21 | barrels | slightly-salty m | ulphur water and 27 barrals | oil in 24 hours. |
| I hereb | | | | true and complete to the best of my kn | |
| | • | | | Skelly 011 Company | V |
| OII | L CONSER | VATION | COMMISSION | By: Company or By: Signs | |
| • | <u> () </u> | <u> </u> | | Title District Superir | tendant |
| tle | | | | Send Communications regarding well to: | |
| | | ••••••••• | | Name Skelly 011 Compa | ay |
| | | | | AddressBox38,Hebbs,B | ov Merico |