NEW EXICO OIL CONSERVATION COMN SION 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 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.

					Sept. 20, 195
WE AR	E HER	EBY R	EQUESTI	NG AN ALLOWABLE FOR A WELL KNOWN	(Date)
OUTHE	RN C	ALIPO	RNIA PI	IT. CORP. Martin Well No	
'	(Compar	ny or Op	crator)	(Lease)	•
Unit Letter		, Sec	31	., T245, R375, NMPM.,Lai	nglie-Mat.tixPool
io				County. Date Spudded7.#19#57	e Drilling Completed - 3-57
Please inc				Elevation Total Depth	1554 PBTD 1552
<u>a</u>	C	В	TA	Top Oil/Gas Pay 3465 Name of Prod	· Form.
		0	-	PRODUCING INTERVAL - Depths meas. from	m KB, 11.6 ft. above GL.
E	F	G	 H 	Perforations 3865 721 3878 35061	3522-331 A 3538-481 (56
-			"	Open Hole Casing Shoe	Depth Tubing
 -	- 72	 _ _	 _ 	OIL WELL TEST -	
L	K	J	I	Natural Prod. Testing bbls.oil, bi	Choke bls water in hrs. min. Site
				Test After Acid or Fracture Treatment (after recove	
M	N	0	P	load oil used):	Chair
l				GAS WELL TEST -	pumping
					* * *
bibling (Casing s	nd Come	nting Recor	Natural Prod. Test: MCF/Day; Hour	
Size		Feet	Sax	me diesering (preset, back pressure, etc.):	
				Test After Acid or Fracture Treatment:	· · · · · · · · · · · · · · · · · · ·
-5/8		170	150	Choke SizeMethod of Testing:	
Ì	35	554	300 CE	Acid or Fracture Treatment (Give amounts of materia	
DV				sand): Casing Thing Property Part first new 2	1. ref. o11, 40,000 lbs.
ocl		156	250 CI	Press Press oil run to tanks	0_11_57
				Oil Transporter Toras Mer Hexico	
-3/8	35	Gas Transporter El Paso Nat 1 Gas Co.			
emarks :		**********	••••••		*****
•••••••	•••••	••••••	• • • • • • • • • • • • • • • • • • • •		•••••
•••••••	•••••	•••••	••••••		
I her	reby cer	rtify tha	t the infor	mation given above is true and complete to the best	t of my knowledge.
proved		••••••	• • • • • • • • • • • • • • • • • • • •	19 SOUTHERN CALL	FORNIA PETROLEUM CORP.
				(Ca)	ompany or Operator)
(OIL C	ONSER	VATION (COMMISSION By: Yawa	auen
	-56	N	71.	/22	(Signature)
:		f,			unications regarding well to:
tle		*********	••••••		ameanous regarding wen en-
				Name	CAL, PET, CORP.