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## REQUEST FOR (WIL) - (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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Jal, New Maxico	De cember	9, 1955
E ARE I	HEREBY :	REOUESTIN	NG AN ALLOWARLE F	(Place) OR A WELL KNOWN A		(Date)
Paso I	latural (	Gas Compan	y Carlson Feder	al Wall No 2	. Se	SW ,
(Co	ompany or C	perator) 23	(Lease	*)  NMPM.,	Tolmos	·····/4
(Unit	, Se	c	, T, R	, NMPM.,	ASTREC	Poo
I	<b>#8</b>		County. Date Spudded.	9-27-55 Dat	e Completed 10-2	3-55-
	se indicate		•	, <b>– –</b>	1 2/	8/17
			Elevation305	7 Total Depth		′
				2350 Name of		
			2436-41; 2504-	.2350-58; 2362-88; 2 22; 2532-40; 2580-82	; 2592-2600; 260	<b>4-18</b>
			Deput to Casing sno	oe of Prod. String		<del></del>
			Natural Prod. Test	······································		BOPD
	<b>x</b>		based on	bbls. Oil in	Hrs	Mins.
		······································	Test after acid or sh	ot	••••••	<b>B</b> OPD
Casing Size	Feet	Sax	Based on	bbls. Oil in	Hrs	Mins.
<b>≒</b> 5/8	922	500	Gas Well Potential	320 MCFPD		***************************************
5-1/2	3304	2110	Size choke in inches	······································	· <del>·····</del>	***************************************
2	2639		Date first oil run to	tanks or gas to Transmission	system:	
		-	Transporter taking	or Gas: El Paso Na	tural Gas Company	,
			•			
marks:	Non-	standard	proration unit will	be applied for.		**************
		*************			***************************************	
		•••••••			•••••	
I hereby	y certify th	at the inform	nation given above is true	e and complete to the best of EL PASO NATURAL	•	
ОИ	CONSE	ুট RVATION C	EOMMASSION	By James C. D.	pany or Operator)	
	1 )1	$\sim$	/ / . (	Zarry C. Zink	(Signature)	
	// (		ed (	Title Division Geo		
le		آر د	Ĩ.		ications regarding well	to:
	*************	•••••••••••••••••	•••••••••••••••••••••••••••••••••••••••	Name Larry C. Zi	nk	
	•			AddressP. O. Box.	1384: Jal. New Me	ord.co.