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

REQUEST FOR (OIL) - (EAS) ALLOWABLE DOC

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 period 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 filted furing 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.

					Jal, New Mexcleo (Place)		September 19, 1960		
VE ARE H	EREBY I	REQUEST	ING AN ALLC	WABLE FO	R A WELL KN	OWN AS:		(Date)	
Westate	e Petre	leum Com	pany Ca	rlson B 26				1/4 SE	
(Cor	npany or U	Derator)		(Lease)			/ t		
Unit Lot	, 5¢ ter	c 	, 1	, R23.3	, NMPM.,	adanta /-/	alai Linka da	Ре	
	les.		County. Da	te Spudded.	ug. 6, 1960	Date Drilling	Completed	Sept. 3, 1	
Pleas	e indicate	location:			Total			541.8*	
D	О ТВ	A	Top Oil/Gas	Pay 5110 *	Name	f Frod. Form.	Linebry		
		^	PRODUCING IN	TERVAL -					
			Perforations	5110-141	5117-201; 51		-501; 515	8-621	
E	F G	H	Open Hole	lene	Depth Casin	g Shoe 60431	Depth Tubing	51601	
			OIL WELL TES	<u>T</u> -					
L	K J	l ا			bbls.oil,0	bbls water i	n hrs.	Chok	
					e Treatment (afte				
M N	V O	P			obls,oil, 0				
			GAS WELL TES			2210 110 001 111	3,		
SE SEC	Sec. 26			-					
<u> </u>			_		MCF/Da	-		Size	
tubing ,Casi Size	ing and Ger Feet	menting Reco	Method of Te	sting (pitot,	back pressure, etc	c.):			
		1	Test After A	cid or Fractur	e Treatment:	MC	CF/Day; Hours	flowed	
11 3/4"	840*	670	Choke Size	Method	of Testing:			· · · · · · · · · · · · · · · · · · ·	
7=	6043*	725	Acid or Fract	ture Treatment	(Give amounts of	materials used, s	uch as acid,	water, oil, an	
<i>(</i> -	and).	147	sand): 30	00 gal. ac	dd.		2		
2 3/8*	51601	Blinebr	Casing Press acke	Tubing Press. 1	Date first oil run to	new tanks September	or 7. 196	0	
	ļ	†			New Merrice P				
			1		o Natural Ca	-			
.emarks:									
								•••••	
I hereb	v certify t	hat the info	ormation given	above is true	and complete to	the best of my kn	owledge.		
pproved	,	2220	•	19		s Petroleum (******************	
pproved	, .	2 / 1966	ر پ			(Company or			
OII	CONSE	RVATION	COMMISSIO	N /	Ву:	ruie J.	Leff.	<u>.</u>	
- Ki					1	-Signati	ire8///		
TUN.	116	M	MULLA		Title Product	ion Superinte	endent	cell to:	
itle		Frain	ear			Communications	regarding v	TOTAL TOTAL	
	1		ကောက်ကောက်၏ မေတာက်ကောက်ကို ရှိသို့သို့ ရိုက်သေးကြီးတွေ့ချိပ်သော သ	* ***********	Name Cloy1	e D. Tiffin			
					Box 1	381, Jal, No.	Mercico		