## MEXICO OIL CONSERVATION COM. ...SSION Santa Fe, New Mexico

RH	EST FO	R (OIL) -	(GAS)	ALLOWABLE
				# . · ·

form shall be submitted by the operator before an initial allowable will be assigned to say 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 dalendar 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

THE VEHICLE	QUESTING AN AI	LLOWABLE FO			in <b>SW</b>	(Date)
(Company or Ope	rator)	(Lease)			•	, -
, Sec (Unit)	32 T. 24	S R 385	, NMPM.,	ollarhide	Pusselman	P
	County.	. Date Spudded	(ay 10,1955	Date Co	mpleted Am	rust 6,1955
Please indicate lo		•		,	r	
	Elec	vation 3169 I	Total De	epth <b>868</b> 9	P.B	
	Тор	o oil/gas pay	1881	Name of Pr	od. Form	reales.
See. 32	+	ing Perforations:.				
	Dep	oth to Casing shoe	of Prod. String	86801		
•	#23 Nat	ural Prod. Test	MONTE	•		BOI
		ed on	bbls. Oil	n	Hrs	Mi
0 PSL & 1830 F	103	t after acid or sho	t	158		ВО
Casing and Comenting	Sax Base	ed on				
2-5/0° 3150°	2000	Well Potential				
5 <u>}</u> n 86801	910	choke in inches	-			
		e first oil run to ta				
	Tra	nsporter taking O	il or Gas: Texas	-New Hext	ee Pipe Line	Gempany
	perforations 850	16-86641 with	10,500 gal	lons Down	11's N-38 ac	id. Vell t
<sub>irks</sub> . <b>Acidisod</b> i						
	14. <i>167</i> 11. 3 11. 12. 19. 1					
Mbls. eil in 2						
I hereby certify that	t the information giv		and complete to	the best of m	y knowledge.	
I hereby certify that			and complete to	the best of m	y knowledge.	
hereby certify that	t the information giv	, 19	and complete to	the best of m Skelly (Compan	y knowledge.	
thereby certify that oved OIL CONSERV	t the information give	, 19	and complete to  By:	the best of m Skelly (Compan (Si	y knowledge.  Oil Company y or Operator)  X UMUlaz gnature	······································
Thereby certify that oved.	t the information give	, 19	and complete to  By:	the best of m  Skelly  (Company  (Si  Dist. S	y knowledge.  Oil Company y or Operator)  × UMUlax gnature	vell to: