## NEW STRAICO OIL CONSERVATION COMM TION Santa Fe, New Mexico

**REQUEST FOR (OIL) - (GAS) ALLOWABLE** 

Form C-104 is to be submitted in QUADRLPLICATE 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 dompigition ger 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.

				<u>Odessa</u> , T (Place)	exas	April 2	(Date)
V <mark>E ARE H</mark> Vdessa N	EREBY R	EQUESTI Gasoline	NG AN ALLOWABLE F e Company -Federal	OR A WELL KN Langlie, A	OWN AS:	NE	'SF
(Cor	npany or Op	erator)	(Lea		, in		<u> </u>
		14	., <b>T</b> 25-S • , <b>R</b> 37	<u>7-Е, NMPM.,</u>	Justis Gas		Pool
ea		· · · · · • • • • • • • • • • • • • • •	County. Date Spudded	2-27-62	Date Drilling (	Completed	3-14-62
	e indicate l		Elevation3104_				
······································	СВ		Top Oil/Gas Pay467	7 <u>2</u> Name	of Prod. Form	<u>Glorietta</u>	
			PRODUCING INTERVAL -			•	
-			Perforations 4672-8	34 <b>'.</b> 4710-31	' <b>,</b> 4752-63'	(2 shots	per foot)
	G	H	Open Hole	Denth		Denth	
			OIL WELL TEST -				
L I	C J	K	Natural Prod. Test:	bble oil	hhle water i	her.	Choke
	•		Test After Acid or Fract	· · ·			
N N	1 0	P	load oil used):				Ch. La
					DDIS water in	nrs,	110. 512e
			GAS WELL TEST -				
	L & 660		- Natural Prod. Test: <u>N</u>	loneMCF/D	ay; Hours flowed	Choke Si	ze
•		enting Recor	rd Method of Testing (pitot	, back pressure, et	c.):		<u> </u>
Sire	Feet	Sax	Test After Acid or Fract				
10-34/ 864' 490		Choke Size <u>CAOF</u> Meth	od of Testing:	Back Pressu	re		
-1/2"	. 4858	525	Acid or Fracture Treatme	nt (Give amounts of	materials used, su	ch as acid, wa	ter, oil, and
+-1/1, 4030 323		sand): Acidized w/	$^{\prime}$ 1500 $\sigma$ als re	a & Frac w/l	5.000.αal		
2-2,13# 4646			Casing Tubing Press. 1575 Press.	Date first 1530 oil run to	new tanks SI.		15,000# Sn
			611 Transporter Permian Corporation				
			Gas Transporter				<del></del>
marks:		-					
		••••••••••••••••••					
						<u> </u>	
T hereby	certify th	at the info	rmation given above is tr				1. And the second se
					atural Gasol		ny
-		1			Junnavant	Operator)	,
OII	. CONSEF	VATION	COMMISSION		(Signatu		·····
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	f			Title	roduction Su Communications	perintend regarding well	ent
tle		1/		•			
				. NameL.	N. Dunnavant	· · · · · · · · · · · · · · · · · · ·	
				AddressB.ox		a, Texas	

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

## New Well