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**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mex.  
**REQUEST FOR (OIL) - (GAS) ALLOWABLE**

(Form C-10)  
Revised 7/1/59

**JAN 12 1961**

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.

**SINCLAIR OIL CORPORATION** **OCT 1 1960** **Hobbs, New Mexico** **January 10, 1961**  
(Company or Operator) (Place) (Date)

**WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:**

**Shelley Oil & Gas Company** **E. E. Wood "B"**, Well No. **25**, in **SE**  $\frac{1}{4}$  **SE**  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

**P**, Sec. **3**, T. **17S**, R. **11E**, NMPM., **Grayburg-Jackson** Pool  
Unit Letter

**Edgy** County. Date Spudded **11-18-60** Date Drilling Completed **1-1-61**  
Elevation **3953** Total Depth **3675** PBTD **3491**

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P X

**660' 1/8 & 660' 1/2**

Tubing, Casing and Cementing Record

Size	Feet	Sax
<b>8-5/8</b>	<b>878</b>	<b>100</b>
<b>4-1/2</b>	<b>3675</b>	<b>125</b>
<b>2-3/8</b>	<b>3491</b>	<b>thg</b>

Top Oil/Gas Pay **3272** Name of Prod. Form. **Grayburg**

**PRODUCING INTERVAL -**

Perforations **3543-3547**

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe **3657** Depth \_\_\_\_\_ Tubing **3491**

**OIL WELL TEST -**

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **87** bbls. oil, **0** bbls water in **12** hrs, **0** min. Size **1/2"** Choke

**GAS WELL TEST -**

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **1750 gals acid & 14,300 gals oil & 10,000 lbs sandoil free**

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. **Packer** Press. **50** oil run to tanks **January 9, 1961**

Oil Transporter **Texas-New Mexico Pipeline Company**

Gas Transporter **Shelley Oil Company**

Remarks: \_\_\_\_\_

I hereby certify that the information given above is true and complete to the best of my knowledge.  
Approved **JAN 12 - 61**, 19\_\_\_\_ **Sinclair Oil & Gas Company**  
(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: **M. L. Armstrong**

Title **OIL AND GAS INSPECTOR**

Orig & 3 cc: **CCC**  
cc: **NPD, JM, File**

By: **E. E. Wood**  
(Signature)

Title **Asst. Dist. Supt.**

Send Communications regarding well to:

Name **E. E. Wood**

Address **520 E Broadway, Hobbs, New Mexico**

OIL CONSERVATION COMMISSION  
ARTESIA DISTRICT OFFICE

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NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
**RECEIVED**  
**JAN 12 1961**

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Sinclair Oil &amp; Gas Company</b>				Lease <b>H. E. West #3</b>		ARTESIA, WELLS, OFFICE <b>25</b>	
Unit Letter <b>P</b>	Section <b>3</b>	Township <b>17S</b>	Range <b>31E</b>	County <b>Eddy</b>			
Pool <b>Grayburg-Jackson</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>P</b>	Section <b>3</b>	Township <b>17S</b>	Range <b>31E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Texas-New Mexico Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Texas-New Mexico Pipeline Company P. O. Box 1510 Midland, Texas</b>			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Skelly Oil Company</b>			Date Con- nected <b>1-10-60</b>	Address (give address to which approved copy of this form is to be sent) <b>Skelly Oil Company P. O. Box 207 Leco Hills, New Mexico</b>			

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING** (please check proper box)

New Well ..... ☒  
Change in Transporter (check one)  
Oil ..... ☐ Dry Gas .... ☐  
Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
Other (explain below)

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 10th day of January, 19 61.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

**OIL AND GAS INSPECTOR**

**JAN 12-61**

**Asst. Dist. Supt.**

**Sinclair Oil & Gas Company**

**520 E Broadway, Hobbs, New Mexico**

Orig & 4 cc: OGC, cc: HFD, JM, File

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ARTESIA DISTRICT OFFICE		
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