

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

JUL 9 1962

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form should 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 QUADRUPPLICATE 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.

Artesia, N. M. July 1, 1962
(Place) (Date)

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

R. C. Silvertorne Kenwood, Well No. 4, in NE 1/4, S8 1/4,
(Company or Operator) (Lease)
K, Sec. 30, T. 18 S., R. 31 E., NMPM., Pool

County Date Spudded 5/4/62 Date Drilling Completed 6/10/62
Elevation Total Depth 2538 PBD

Please indicate location:

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

Top Oil/Gas Pay 2485 Name of Prod. Form.
PRODUCING INTERVAL -
Perforations 2485-91 2500-06
Open Hole Depth 2538 Casing Shoe 2538 Tubing 2410

OIL WELL TEST -
Natural Prod. Test: 1 bbls. oil, bbls water in 24 hrs, min. Size
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 42 bbls. oil, bbls water in 24 hrs, min. Size 8

GAS WELL TEST -
Natural Prod. Test: MCF/Day; Hours flowed Choke Size

1050/8

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	810	50
5 1/2	2538	200
2	2410	

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): 30,000 lbs oil & 60,000 lbs
Casing Tubing Date first new
Press. 340 Press. 120 oil run to tanks 6/30/62

Oil Transporter T N M P L
Gas Transporter Phillips Pet. Co.

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: 9 1962, 19

R. C. Silvertorne
(Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

By: A. H. Fryman
(Signature)

Title: OIL AND GAS INSPECTOR

Title: Agent-Consultant
Send Communications regarding well to:

Name: A. D. Fryman
Address: 1503 Washington Artesia, N. M.

OIL CONSERVATION COMMISSION

ARTESIA DISTRICT OFFICE

No. Copies Received

6

DATE

5

BY

1

NAME

1

TITLE

1

ORGANIZATION

1

ADDRESS

1

CITY

1

STATE

1

ZIP

1

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	5
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRORATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator R. Q. Silverthorne			Lease Kenwood Fed.	Well No. 4
Unit Letter "KN"	Section 30	Township 18 S	Range 31 E	County Eddy
Pool Shugart			Kind of Lease (State, Fed, Fee) Fed.	

If well produces oil or condensate give location of tanks	Unit Letter "KN"	Section 30	Township 18 S	Range 31 E
--	----------------------------	----------------------	-------------------------	----------------------

Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> T. N. M. P. L.	Address (give address to which approved copy of this form is to be sent) P. O. Box 1510 Midland, Texas
---	--

Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Phillips Pet. Co.	Date Connected 7/1/62	Address (give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma
---	---------------------------------	---

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

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

New Well <input checked="" type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>	

RECEIVED
JUL 10 1962
O. C. C.
ARTESIA, N.M.

Remarks

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

Executed this the _____ day of _____, 19____.

OIL CONSERVATION COMMISSION	By A. H. Fryman
Approved by M. L. Armstrong	Title Agent-Consultant
Title OIL AND GAS INSPECTOR	Company R. Q. Silverthorne
Date 9 1962	Address 1503 Washin ton Artesia, N. M.