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LAND OFFICE	
TRANSPORTER	OIL <u>1</u> GAS <u>1</u>
PRODUCTION	
OPERATION	

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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 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.

Midland, Texas 12-28-64
(Place) (Date)

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

Oil Company Jones Federal "E", Well No. 1, in ST 1/4 NE 1/4,
(Company or Operator) (Lease)
Sec. 23, T. 19-S, R. 31-E, NMPM., Undesignated Lusk Pool
Unit Letter Strawn

Faddy County Date Spudded 11-12-64 Date Drilling Completed 12-16-64
Elevation 3533 GL Total Depth 11,600 PBD 11,563
Top Oil/Gas Pay 11,017 Name of Prod. Form. Strawn

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

Please indicate location:

PRODUCING INTERVAL -
Perforations 11,530-11,540
Open Hole _____ Depth _____ Casing Shoe 11,600 Depth _____ Tubing 11,537

OIL WELL TEST -
Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 432 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size 3 1/2"

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: _____

1960' TEL. & 660' TEL.
(FOOTAGE)

Tubing, Casing and Cementing Record

Sur	Feet	Size
<u>1</u>	<u>653</u>	<u>650</u>
<u>8</u>	<u>3925</u>	<u>400</u>
<u>4</u>	<u>11600</u>	<u>380</u>
<u>6</u>	<u>11537</u>	

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 2500 gals. ret. acid
Casing Press. pk. Tubing Press. 1250 Date first new oil run to tanks 12-21-64
Oil Transporter The Permian Corporation
Gas Transporter None

RECEIVED

DEC 30 1964

Remarks: _____
O. C. C.
ARTESIA OFFICE

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved DEC 30 1964, 19____

OIL CONSERVATION COMMISSION
By P. L. Ham
Title Oil and Gas Inspector

Tenneco Oil Company
(Company or Operator)
By [Signature]
(Signature) R.O. well
Title District Office Supervisor
Send Communications regarding well to:
Name Tenneco Oil Company
Address Box 1031, Midland, Texas