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LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

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 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.

Midland, Texas

May 24, 1963

(Place)

(Date)

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

Greathouse, Pierce & Davis #1 Lee Carter

(Company or Operator)

Well No. 1

(Lease)

in SW

1/4 SW

1/4

M

Sec. 14

T-15-S

R-38-E

NMPM, Medicine Rock

Pool

Unit Letter

Lee

County Date Spudded 1-29-63

Date Drilling Completed

4-5-63

Please indicate location:

Elevation 3736 Grd.

Oil Depth 12845'

FBTD

Top Oil/Gas Pay 12820

Name of Prod. Form. Devonian

PRODUCING INTERVAL -

Perforations 12830-12834; 12820-12826

Open Hole

Casing Shoe 12845

Depth

Tubing 12800

OIL WELL TEST -

Natural Prod. Test: 142 bbls. oil, trace bbls. water in 24 hrs, min. Size swabbing

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 158 bbls. oil, trace bbls. water in 24 hrs, min. Size PUMPING

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): 500 gals. acid

Casing Tubing Date first new Press. Press. oil run to tanks 5-14-63

Oil Transporter: Texas New Mexico Pipe Line Company

Gas Transporter: Atlantic Refining Company

Remarks:

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

Approved: , 19

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

By:

Title:

partner

Send Communications regarding well to:

Title

Name:

Greathouse, Pierce & Davis