

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

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

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

DUAL

HOBBS OFFICE O.C.C.

NEW MEXICO
OIL CONSERVATION COMMISSION

DEC 30 8 14 AM '63

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.

Roswell, New Mexico

December 27, 1963

(Place)

(Date)

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

Shell Oil Company
(Company or Operator)

State "V", Well No. 5, in NE 1/4 SE 1/4
(Lease)

I, Sec. 27, T. 17S, R. 35E, NMPM., undesignated Pool
Unit Letter

Lea

County. Date Spudded 10-17-63

Date Drilling Completed 11-2-63

Please indicate location:

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

R-35-E

Elevation 3932' DF Total Depth 6250' PBD 6218'

Top Oil/Gas Pay 3031' Name of Prod. Form. Yates

PRODUCING INTERVAL - 3031' - 3033', 3068', 3069', 3070', 3071', 3072',

Perforations 3073', 3074', 3091', 3095', 3103', 3104', 3131', 3132'

Open Hole - Depth Casing Shoe 6250' Depth Tubing 3161'

17 OIL WELL TEST -

S Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ 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, 1 bbls water in 14 hrs, _____ min. Choke Size 24/64"

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): 300 G. 15% BDA, 20,000 G. LC, 30,000# Sand, 1000# Mark II Adomite

Casing 1500 G. 1 1/2" MCA Tubing Date first new
Press 920-300 Press 175-20 oil run to tanks December 9, 1963

Oil Transporter The Permian Corporation (Trucks)

Gas Transporter none

Remarks: Dual completed w/Paddock as per NMOC Order No. R-2624, dated December 19, 1963.

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

Approved _____, 19 _____

Shell Oil Company
(Company or Operator)

By: R. A. Lowery Original Signed By:
(Signature R. A. LOWERY)

OIL CONSERVATION COMMISSION

Title: District Exploitation Engineer

By: _____
Title _____

Name: Shell Oil Company

Address: P. O. Box 1858, Roswell, New Mexico 88201