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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

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.

**Hobbs, New Mexico**

**10-26-62**

(Place)

(Date)

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

**Moran Oil Prod. & Drilg. Corp. State M-16**

, Well No. **1**, in **NE**  $\frac{1}{4}$  **NE**  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

**A**

Sec. **16**

T. **19**

R. **38**

NMPM.,

**Hobbs**

Pool

Unit Letter

County. Date Spudded **9-29-62**

Date Drilling Completed **10-6-62**

Elevation **3614**

Total Depth **4155**

FBTD

**4148**

Please indicate location:

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

**330/N 330/E**

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
<b>8 5/8</b>	<b>303</b>	<b>175</b>
<b>4 1/2</b>	<b>4153</b>	<b>200</b>

Top Oil/Gas Pay **4087**

Name of Prod. Form. **Grayburg**

PRODUCING INTERVAL -

Perforations **4087-89; 4096-97; 4116-20; 4125-26**

Open Hole

Depth **4153**

Depth **4128**

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): **40** bbls. oil, **0** bbls water in **24** hrs, \_\_\_\_\_ min. Size **31** Pump

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): \_\_\_\_\_

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks **10-25-62**

Oil Transporter **Western Oil Trans.**

Gas Transporter **Phillips Pet.**

Remarks: **Acid perms w/1000 gals. frac w/40,000 gals. R.O. - 103,000#**

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

Approved \_\_\_\_\_, 19\_\_\_\_

**Moran Oil Prod. & Drilg. Corp.**

(Company or Operator)

By: **K. D. McPeters** **K. D. McPeters**  
(Signature)

**Engineer**

Title \_\_\_\_\_

Send Communications regarding well to:

Name **Moran Oil Prod. & Drilg. Corp.**

Address **Box 1718, Hobbs, New Mexico**

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

Title \_\_\_\_\_

MORAN OIL PROD. & DRILG. CORP.

STATE M-16 No. 1 (Sec. 16, T19S, R38E, LEA Co., NEW Mex.)

<u>DEPTH</u>	<u>DEVIATION DEGREES</u>
55	3/4
750	1/2
912	1/2
1410	3/4
1920	3/4
2354	1 1/2
2712	2
3133	2 1/2
3385	2 3/4
3630	1 1/4
3900	1 1/2
4080	1 3/4

I HEREBY CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND COMPLETE  
TO THE BEST OF MY KNOWLEDGE.

*K. D. McPeters*

K. D. MCPETERS

MORAN OIL PRODUCING & DRILLING CORP.  
Box 1718  
HOBBS, NEW MEXICO

STATE OF NEW MEXICO

COUNTY OF LEA

SIGNED AND SWORN BEFORE THE UNDERSIGNED AUTHORITY ON THIS 25TH DAY OF  
OCTOBER, 1962.

My COMMISSION EXPIRES:

9-16-63

*Edna Huff*

EDNA HUFF, NOTARY PUBLIC, STATE OF NEW MEX.,  
COUNTY OF LEA.

C  
O  
P  
Y

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE 10/14/2000 BY SP-6 BTJ/STW

REMARKS

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