

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. TEXACO Inc. P.O. Box 728 Hobbs, New Mexico

October 5, 1961  
(Place) (Date)

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

TEXACO Inc. C. E. Penny NCT-4, Well No. 6, in SW 1/4 NW 1/4,  
(Company or Operator) (Lease)  
E, Sec. 19, T. 25-S, R. 38-E, NMPM, Undesignated Pool  
Unit Letter

Lea County Date Spudded Aug. 8, 1961 Date Drilling Completed Sept. 6, 1961  
Elevation 3074' (D.F.) Total Depth 5950' PBD 5948'  
Top Oil Pay 5263' Name of Prod. Form. Blinebry

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

PRODUCING INTERVAL -

Perforations See remarks

Open Hole None Depth Casing Shoe 5949' Depth Tubing 5225'

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): 55 bbls. oil, 0 bbls water in 12 hrs, 0 min. Choke Size 15/64"

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
7 5/8"	867	300
5 1/2"	5939	350
2 1/16"	5216	

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): See remarks

Casing Tubing Date first new Press. 100 Press. 300 oil run to tanks October 1, 1961

Oil Transporter TEXACO Inc. (Trucks)

Gas Transporter (None) To be connected later.

Remarks: Perforate 5 1/2" O.D. casing with one jet shot every three feet. 5263' to 5278', 528' to 5305', 5318' to 5338', 5352' to 5355', 5379' to 5388', 5392' to 5422', 5432' to 5438', and 5460' to 5469'. Acidize with 2000 gals. LST. NEA. Swap well.

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

Approved, 19.....

TEXACO Inc.  
(Company or Operator)

By: *[Signature]*  
(Signature)

OIL CONSERVATION COMMISSION

Title Assistant District Superintendent  
Send Communications regarding well to:

Name H. N. Wade

Address P.O. Box 728 Hobbs, New Mexico

By: *[Signature]*

Title