

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.

Hobbs, New Mexico, July 15, 1963
(Place) (Date)

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

TEXACO Inc. State of New Mexico "O" NCT-1, Well No. 11, in SE 1/4 NW 1/4,

(Company or Operator)

(Lease)

F, Sec 36

T 17-S, R 34-E, NMPM, Vacuum North Abo Pool

Unit Letter

Lea

County Date Spudded 11-16-62 Date Drilling Completed 1-25-63
Elevation 4020 (DF) Total Depth 12,155 PBTD 10,174

Please indicate location:

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

Top Oil ~~XXXXXX~~ 9139 Name of Prod. Form. North Abo

PRODUCING INTERVAL -

Perforations See Remarks

Open Hole Depth Casing Shoe 12,154 Depth Tubing 11,200

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): 201 bbls oil, 0 bbls water in 24 hrs, 0 min. Size 22/64" Choke

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Size
13-3/8"	327	350
10-3/4"	100	1600
9-5/8"	4682	1600

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 oil run to tanks July 10, 1963
Press. 875

Oil Transporter Texas New Mexico Pipe Line Company

Gas Transporter Phillips Pipe Line Company

Remarks: Perforate 2-3/8" O.D. Casing with 2-Jet Shots per foot from 9139-41'; 9155-59'; 9182-86'; 9193-95'; 9217-22'; 9235-43'; Acidize perforations with 500 gallons of 15% LSTNE.

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: *J. G. Blevins, Jr.*
(Signature)

OIL CONSERVATION COMMISSION

By: *[Signature]*

Title Assistant District Superintendent

Send Communications regarding well to:

Title _____

Name TEXACO Inc.

Address P.O. Box 728, Hobbs, New Mexico