

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 August 9, 1957
(Place) (Date)

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

Tidewater Oil Company State "AI", Well No. 4, in NE 1/4 NW 1/4,
(Company or Operator) (Lease)
C, Sec. 15, T. 19S, R. 37E, NMPM., Eumont Pool
Unit Letter Lea

County. Date Spudded 7-6-57 Date Drilling Completed 7-20-57
Elevation 3667 K.D. Total Depth 4011 PBD 4005

Please indicate location:

Top Oil/Gas Pay 3973 Name of Prod. Form. Penrose

PRODUCING INTERVAL -

Perforations 3973-81 & 3985-98'

Open Hole Depth 4009 Casing Shoe Depth Tubing 3953

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): 37.12 bbls. oil, 0 bbls water in 24 hrs, _____ min. Choke Size 20/64"

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): 500 gals. 15% NE acid, 15,000 gals. refined crude, 10,000#

Casing Tubing Date first new Press. _____ oil run to tanks 8/7/57 sand

Oil Transporter Texas-New Mexico Pipe Line Co.

Gas Transporter Phillips Petroleum Co.

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

Sec. 15, T19S, R37E

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	375	300
5-1/2	4009	800

Remarks: Well flowing on intermitter.

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

Approved: _____, 19____

Tidewater Oil Company

(Company or Operator)
Original Signed By

By: H. P. SHACKELFORD
(Signature) H. P. Shackelford

OIL CONSERVATION COMMISSION

By: _____

Title Area Supt.

Title _____

Send Communications regarding well to:

Name H. P. Shackelford

Address Box 547 Hobbs, New Mexico