

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
HOBBS OFFICE 000

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
(Place)

August 12, 1959
(Date)

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

Sinclair Oil & Gas Company J.R. Phillips "A", Well No. 8, in SW 1/4, SW 1/4,
(Company or Operator) (Lease)

N, Sec. 22, T. 19N, R. 37E, NMPM, Pool

Loc

County. Date Spudded 12-18-58 Date Drilling Completed 2-28-59

Please indicate location:

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

Elevation 3572 Total Depth 9900 PBD 9800

Top Oil/Gas Pay 9504 Name of Prod. Form. McKee

PRODUCING INTERVAL -

Perforations 9528-9574 & 9588-9614

Open Hole Depth 9899 Casing Shoe 9899 Depth Tubing 9493

OIL WELL TEST -

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 Choke load oil used): bbls. oil, bbls water in hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: 1963 MCF/Day; Hours flowed 24 Choke Size 3/4"

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8	981	900
9-5/8	2950	1500
5-1/2	9899	700
2"	9493	Tbg

Method of Testing (pitot, back pressure, etc.): Back Pressure

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): None

Casing Tubing Date first new Press. oil run to tanks

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter LP-El Paso Natural Gas Co; LP-Harmon Petroleum Corp.

Remarks:

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

Approved: 19 Sinclair Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: John W. Ryan

Title

By: C.G. Salter
(Signature)

Title: Dist. Supt.
Send Communications regarding well to:

Name: C.G. Salter

Address: 520 E Broadway, Hobbs, N.M.

Orig & 3cc: OCC; cc: FMR, HPD, File