

DUPLICATE

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

RECEIVED
(Form C-104)
(Revised 7/1/52)
DEC 14 1953
Oil Conservation Commission
HOBBBS OFFICE

REQUEST FOR ~~WELL~~ - (GAS) ALLOWABLE

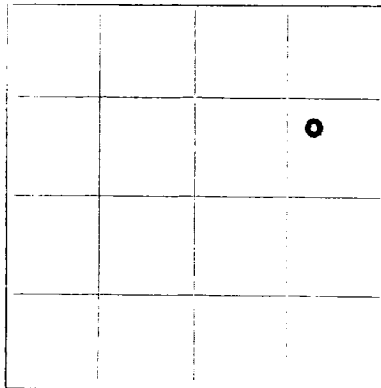
This form shall be submitted by the operator before an initial allowable will be assigned to any completed or recompleted well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-104 was filed. The allowable will be assigned effective 7:00 A.M. on date of completion 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Fort Worth, Texas 12-9-1953
(Place) (Date)

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

Albert Gackle **Sinclair State**, Well No. **4**, in **SE** 1/4 **NE** 1/4,
(Company or Operator) (Lease)
H, Sec. **3**, T. **23S**, R. **36E**, NMPM., **Langlie-Mattix** Pool
(Unit)
Lea County. Date Spudded **11-2-1949**, Date Completed **11-21-1949**

Please indicate location:



Elevation..... Total Depth..... **3325**..... P.B.....

Top oil/gas pay..... **31 68**..... Top of Prod. Form..... **Yates - 3168**

Casing Perforations:..... or

Depth to Casing shoe of Prod. String..... **3045**.....

Natural Prod. Test..... BOPD

based on..... bbls. Oil in..... Hrs..... Mins.

Test after acid or shot..... BOPD

Based on..... bbls. Oil in..... Hrs..... Mins.

Gas Well Potential..... **6,000 MCF**.....

Size choke in inches.....

Date first ~~produced~~ gas to Transmission system:..... **January 1952**.....

Transporter taking Oil or Gas:..... **Southern Union Gas Company**
Dallas, Texas

Remarks:.....

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

Approved..... **DEC 21 1953**....., 19..... **ALBERT GACKLE, OPERATOR**
(Company or Operator)

OIL CONSERVATION COMMISSION
By: **A. G. Stanley**
Title.....

By: **Albert Gackle**
(Signature)
Title..... **OPERATOR**
Send Communications regarding well to:

Name..... **ALBERT GACKLE**
Address..... **419 Ft. Worth National Bank Bldg**
Ft. Worth 2, Texas