

REQUEST FOR (OIL) - (ALLOWABLE) ALLOWABLE

New Well
~~Exploration~~

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 November 28, 1960
(Place) (Date)

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

Texas Pacific Coal & Oil Co. - State "A" A/c-1, Well No. 97, in SE 1/4 NW 1/4,
(Company or Operator) (Lease)

F, Sec. 22, T. 23-S, R. 36-E, NMPM, Langlie-Mattix Pool
Unit Letter

Loc. County Date Spudded 10/22/60 Date Drilling Completed 10/29/60

Please indicate location:

Elevation Total Depth 3645 PBD 3580

Top Oil/Gas Pay 3568 Name of Prod. Form. Seven Rivers

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

PRODUCING INTERVAL -

Perforations 3568-76, 3586-92

Open Hole --- Depth 3645 Casing Shoe 3310 Tubing

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 Choke load oil used): 37.5 bbls.oil, 2.5 bbls water in 24 hrs, min. Size 32/64

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

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

Size	Feet	Sax
9-5/8"	323	300
7"	3635	250

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): SOT w/10,000 gal. lease oil w/1/40 H/gal. Adomite Mark II &

Casing Tubing Date first new 10,000# sand
Press. 2700 oil run to tanks 11/8/60

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter El Paso Natural Gas Company

Remarks:

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

Approved: _____, 19_____

Texas Pacific Coal & Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: *[Signature]*
(Signature)

By: *[Signature]*

Title: District Engineer
Send Communications regarding well to:

Title: _____

Name: Texas Pacific Coal & Oil Company

Address: P. O. Box 1688, Hobbs, New Mexico