

N. MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico **March 1, 1956**

(Place) Date

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

Sinclair Oil & Gas Company **J. L. Keel "A"**, Well No. **13**, in **NW** 1/4 **NE** 1/4
Company or Operator (Lease)

B, Sec. **7**, T. **17S**, R. **31E**, NMPM., **Grayburg Jackson** Pool
Unit

Eddy County. Date Spudded **12-9-55**, Date Completed **2-29-56**

Please indicate location:

		X	

Elevation **3765** Total Depth **3501** P.B. **-**

Top oil/gas pay **3422'** Name of Prod. Form **San Andres**

Casing Perforations: **None** or

Depth to Casing shoe of Prod. String **2852'**

Natural Prod. Test **-** BOPD

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

Test after acid or shot **96** BOPD

Based on **72** bbls. Oil in **18** Hrs. **0** Mins.

Gas Well Potential

Size choke in inches **15/64"**

Date first oil run to tanks or gas to Transmission system: **March 1, 1956**

Transporter taking Oil or Gas: **Texas-New Mexico Pipe Line Company**

Casing and Cementing Record

Size Feet Sax

8-5/8	560	100
5-1/2	2852	200
2"	3422	-

Remarks: **New Well**

Orig & 3as: **OGC**

cc: **FER, JTR, File**

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: **P. G. Janson**

By: **[Signature]**
(Signature)

Title: **District Superintendent**

Send Communications regarding well to:

Title _____

Name: **C. G. Salter**

Address: **520 E. Broadway, Hobbs, New Mexico**