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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PERORATION OFFICE	
OPERATOR	

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
FEB 21 1962

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 - February 21, 1962
(Place) (Date)

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

Skelly Oil Company

Dow "B"

Well No. 38, in SE 1/4 NE 1/4,

(Company or Operator)

(Lease)

Unit Letter

Sec. 21

T. 17-S, R. 31-N, NMPM, Grayburg Jackson Pool

Eddy

County. Date Spudded Feb. 4, 1962 Date Drilling Completed Feb. 10, 1962

Please indicate location:

Elevation 3835' DP Total Depth 3720' PBD 3708'

Top Oil/Gas Pay 3350' Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 3568-3695' (intervals)

Open Hole Depth Casing Shoe 3714' Depth Tubing 3553'

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 load oil used): 80 bbls. oil, 28 bbls water in 24 hrs, - min. Size 20/64" Choke

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): Fractured w/55,000 gals. lsa. oil & 40,000# 20/40 sand.

Casing Press. 250# Tubing Press. Date first new oil run to tanks February 16, 1962

Oil Transporter Texas-New Mexico Pipe Line Co.

Gas Transporter Skelly Oil Company

2080' PBL & 710' PBL
(FOOTAGE)

Tubing, Casing and Cementing Record

Size Feet Sax

Size	Feet	Sax
7"	610'	350
4-1/2"	3714'	150
2"	3553'	—

Remarks:

Well flowed 80 bbls. oil & 28 bbls. water in 24 hours through 20/64" choke, C.P. 250#.

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

Approved, 19

Skelly Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)

By: (Signature)

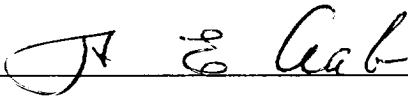
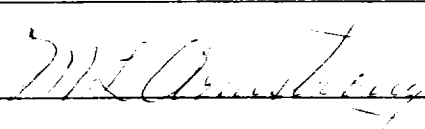
Title: Dist. Supt.

Title: OIL AND GAS INSPECTOR

Send Communications regarding well to:

Skelly Oil Company

P.O. Box 38 - Hobbs, New Mexico

NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			FORM C-110 (Rev. 7-60)
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE					
Company or Operator Skelly Oil Company			Lease Dow "B"	Well No. 38	
Unit Letter "HM"	Section 21	Township 17-S	Range 31-E	County Eddy	
Pool Grayburg Jackson			Kind of Lease (State, Fed, Fee) Federal		
If well produces oil or condensate give location of tanks		Unit Letter "DM"	Section 21	Township 17-S	
				Range 31-E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>			Address (give address to which approved copy of this form is to be sent)		
Texas-New Mexico Pipe Line Co.			P.O. Box 1510 - Midland, Texas		
Is Gas Actually Connected? Yes XXXX No _____					
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected 2/16/62	Address (give address to which approved copy of this form is to be sent)		
Skelly Oil Company Maljamar Gasoline Plant			P.O. Box 207 - Loco Hills, New Mexico		
If gas is not being sold, give reasons and also explain its present disposition:					
REASON(S) FOR FILING (please check proper box)					
New Well <input checked="" type="checkbox"/> Change in Ownership <input type="checkbox"/> ARTESIAN Change in Transporter (check one) Other (explain below) Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>					
Remarks					
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.					
Executed this the <u>21st</u> day of <u>February</u> , 19 <u>62</u> .					
OIL CONSERVATION COMMISSION			By		
Approved by			 Dist. Supt.		
Title					
 OIL AND GAS INSPECTOR			Company		
Date			Address		
FEB 26 1962			Box 38 - Hobbs, New Mexico		