

REQUEST FOR (OIL) - (GAS) ALLOWABLE **RECEIVED** New Well Re-completion

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 submitted. 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.

**ARTESIA, NEW MEXICO** 9/25/61  
(Place) (Date)

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

**IVERSON & WELCH** **SHUGART A**, Well No. **A-9**, in **NE** 1/4 **SE** 1/4,  
(Company or Operator) (Lease)

**I**, Sec. **29**, T. **18S**, R. **31E**, NMPM., **NORTH SH. QUEEN GB** Pool

Unit Letter

**EDDY**

County. Date Spudded **JUNE 19, 1961** Date Drilling Completed **8/9/61**

Elevation **-** Total Depth **3880** PBD **3615**

Please indicate location:

Top Oil/Gas Pay **3280** Name of Prod. Form. **QUEEN**

PRODUCING INTERVAL - **3760-74; 3700-27**

Perforations **3556-52; 3556-64 - 3280-3326**

Open Hole **-** Depth **3811** Depth Tubing **3550**

OIL WELL TEST -

Natural Prod. Test: **5** bbls. oil, **-** bbls water in **24** hrs, **-** min. Size **SWAB**

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **150** bbls. oil, **-** bbls water in **24** hrs, **-** min. Size **CHOKED**

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): **SEE BELOW**

Casing Press. **550** Tubing Press. **150** Date first new oil run to tanks **SEPT. 13, 1961**

Oil Transporter **TEXAS NEW MEXICO PIPE LINE CO.**

Gas Transporter **PHILLIPS-PETROLEUM CO.**

Remarks: **3760-3774 - 52,000 GALS. OIL & 87,000 SAND.**  
**3700-3727 - 32,000 GALS. OIL & 87,000 SAND.**  
**3556-52; 3556-64 - 32,000 GALS. OIL & 80,000 SAND**  
**3280-3326 - 52,000 GALS. OIL AND 80,000 SAND.**

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

Approved **SEP 25 1961**, 19\_\_\_\_\_

**IVERSON & WELCH**  
(Company or Operator)  
By: *[Signature]*  
(Signature)

OIL CONSERVATION COMMISSION

By: *[Signature]*

Title: **AGENT**  
Send Communications regarding well to:

Title: **Oil and Gas Inspector**

Name: **IVERSON & WELCH**  
**DRAWER W**  
Address: **ARTESIA, NEW MEXICO**

OIL CONSERVATION COMMISSION

ARTESIA DISTRICT OFFICE

No. of Wells	6
No. of Acres	
No. of Tracts	
No. of Sections	3
No. of Townships	1
No. of Ranges	1
U. S. G. S.	
TRANSFER	
FILE	
REGISTRATION	1
	<input checked="" type="checkbox"/>

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

SEP 25 1961

Company or Operator IVERSON & WELCH Lease SHUGART A

Well No. A-9 Unit Letter I S29 T T8S R 31E Pool ARTESIA, N.S.C. Co. FEIGE

County EDDY Kind of Lease (State, Fed. or Patented) FEDERAL

If well produces oil or condensate, give location of tanks: Unit N S 29 T8S R 31E

Authorized Transporter of Oil or Condensate TEXAS NEW MEXICO PIPE LINE CO.

Address P.O. BOX 1510  
MIDLAND, TEXAS

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas PHILLIPS PETROLEUM Co.

Address BARTLESVILLE, OKLAHOMA Date Connected 9/13/61

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well NEW WELL ( )

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership ( ) Other ( )

Remarks: (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 25 day of SEPT. 19 61

By [Signature]

Approved SEP 25 1961 19 61

Title AGENT

OIL CONSERVATION COMMISSION

Company IVERSON & WELCH

By M L Armstrong

Address DRAWER W

Title OIL AND GAS INSPECTOR

Address ARTESIA, NEW MEXICO

OIL CONSERVATION COMMISSION  
ARTESIA DISTRICT OFFICE

115 Center Street

DISTRIBUTION

6

TO	BY	DATE
SANTO RE	7	
PRODUCTION OFFICE		
STATE LAND OFFICE		
U. S. G. S.		
TRANSFER LN		
FILE	1	
BUREAU OF MINES	1	✓
<i>Geo. Jones</i>	1	