

RECEIVED Form C-104
Revised 7/1/57
OCT 27 1960 New Well
Recompletion

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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

ARTESIA, NEW MEXICO 10/25/60
(Place) (Date)

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

IVERSON & WELCH SHUGART, Well No. 6-I-1-C in SE $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)

P 30 T 18S R 31E, NMPM, UNDESIGNATED N. Shug. P. J. Pool
Unit Letter

EDDY

County EDDY Date Spudded 8/26/60 Date Drilling Completed 10/14/60
Elevation - Total Depth 3690 PBTD -

Please indicate location:

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

3305. E

Top Oil/Gas Pay 3611 Name of Prod. Form. QUEEN

PRODUCING INTERVAL 3611-3625, 6 SHOTS/FOOT

Perforations 3631-3646, 6 SHOTS/FOOT

Open Hole - Depth - Casing Shoe 3689 Depth Tubing 3639

OIL WELL TEST -

Natural Prod. Test: 10 bbls. oil, - bbls water in 24 hrs, - min. Choke Size NONE

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 90 bbls. oil, - bbls water in 24 hrs, - min. Choke Size PUMPING

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 Tubing Date first new 10/22/60
Press. - Press. - oil run to tanks

Oil Transporter TEXAS NEW MEXICO PIPE LINE CO.

Gas Transporter NONE

Remarks: SANDFRAC 10/19/60 THRU PERFORATIONS IN 5" CASING FROM 3611 TO 3625 AND 3631 TO 3646 USING 868 BBLs. OF OIL AND 60,000# OF SAND

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

Approved OCT 27 1960, 19.....

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title OIL AND GAS INSPECTOR

IVERSON & WELCH
(Company or Operator)

By: [Signature]
(Signature)

Title AGENT

Send Communications regarding well to:

Name IVERSON & WELCH

P. O. BOX 1417

Address ARTESIA, NEW MEXICO

OIL CONSERVATION COMMISSION

ARTESIA DISTRICT OFFICE

No. Copies Received 6

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OPERATOR	<u>3</u>	
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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55
RECEIVED

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

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

OCT 27 1960

O. C. C.
ARTESIA, OFFICE

Company or Operator IVERSON & WELCH Lease SHUGART

Well No. ^{1-C}~~9-T~~ Unit Letter P S 30 T 188 R 312 Pool UNDESIGNATED N. Shug. P. 9

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

If well produces oil or condensate, give location of tanks: Unit P S 30 T 188 R 312

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 -

Address _____ Date Connected _____

(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:

VENTED

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 _____ day of _____ 19 _____

By I. S. Welch

Approved OCT 27 1960 19 _____

Title AGENT

OIL CONSERVATION COMMISSION

Company IVERSON & WELCH

By M. L. Armstrong

Address P. O. BOX 1417

Title OIL AND GAS INSPECTOR

ARTESIA, NEW MEXICO

OIL CONSERVATION COMMISSION
ARTESIA DISTRICT OFFICE

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