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	GAS
PRODUCTION OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

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 QUADRUPLICATE 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.

Midland, Texas

December 24, 1964

(Place)

(Date)

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

Western Drilling Co., Gulf Federal, Well No. 2, in SW 1/4 NE 1/4,

(Company or Operator)

(Lease)

G, Sec. 29, T. 9-S, R. 38-E, NMPM., San Andres Pool

Unit Letter

Lea

County. Date Spudded 10-10-60 Date Drilling Completed 10-27-60

Elevation 3995 Total Depth 5020 PBD

Top Oil/Gas Pay 4908 Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 4908-4995

Open Hole Depth Casing Shoe 5010 Depth Tubing 4995

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): 18 bbls. oil, 4 bbls water in 24 hrs, min. Size 10/64

GAS WELL TEST -

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

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

Test After Acid or Fracture Treatment: 1000 MCF/Day; Hours flowed 24

Choke Size 10/64 Method of Testing: Pitot

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Press. 1575 Tubing Press. 1250 Date first new oil run to tanks 12-26-64

Oil Transporter Permain Corp. Midland, Texas

Gas Transporter El Capitani, Dallas Texas

Remarks:

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

Approved December 24, 1964

Western Drilling Co.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: M. B. J. [Signature] (Signature)

Title Supervisor

Send Communications regarding well to:

Name Western Drilling Co.

Box 1392 Longview, Texas

Address

By: [Signature]

Title