

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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.

Hobbs, New Mexico

June 9, 1964

(Place)

(Date)

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

Socony Mobil Oil Company, Inc.

State "NM"

Well No. 14

in NE

1/4

NW

1/4

(Company or Operator)

(Lease)

C

Sec. 34

T. 17S

R. 35E

NMPM, Undesignated

Pool

Unit Letter

Lea

County. Date Spudded. 5/17/64

Date Drilling Completed

5/29/64

Elevation 5950

Total Depth 6300

PBTD

6208

Top Oil/Gas Pay 6104

Name of Prod. Form. Glorieta

PRODUCING INTERVAL -

Perforations 6104 - 6120

Open Hole -

Depth

Casing Shoe 6300

Depth

Tubing 6045

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

Flow load oil used): 220 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 14/64" 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): 1,000 gal 15% NE Acid

Casing Press. Pkr. Tubing Press. 320 Date first new oil run to tanks 6/7/64

Oil Transporter McWood Corporation

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Size
8 5/8"	1612	850
4 1/2"	6300	2238
2"	6045	-

Remarks: Gty 41.0 @ 60° GOR 614

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

Approved _____, 19_____

Socony Mobil Oil Company, Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

Title Group Supervisor

Send Communications regarding well to:

Name Socony Mobil Oil Company, Inc.

Address Box 1800, Hobbs, New Mexico

By: _____

Title _____