

RECEIVED  
NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico  
REQUEST FOR (OIL) - (~~NEW~~) ALLOWABLE

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

DEC 17 1962

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 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.

Oklahoma City 2, Oklahoma 12/12/62  
(Place) (Date)

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

Max Pray

Federal

Well No. 2

in NW 1/4

NE 1/4

(Company or Operator)

(Lease)

under

B

Sec. 30

T. 15 S

R. 29 E

Round Tank - San Andres

Pool

Unit Letter

Chaves

County Date Spudded 11-16-62

(11:00 AM)

(10:00 PM)

Please indicate location:

Elevation 3748 K.B.

Date Drilling Completed 11-18-62

P.B.T.D.

Top Oil Pay

2886'

Depth of Prod. Form.

San Andres

PRODUCTIVE INTERVAL -

Perforations

None

Open Hole

3058-3116'

Depth

Casing Shoe

Depth

Tubing

3050'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 72 bbls oil, 144 bbls water in 24 hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

GAS WELL TEST -

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

Method of Testing (nitro, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing \_\_\_\_\_

Acid or Fracture Treatment (Give name of materials used, such as acid, water, oil, and sand): 60,000# sand & 34,000 gallons gelled salt water

Casing Tubing Date first injection 36 bbls min.

Press. Press. \_\_\_\_\_ bbls min to tanks 12-11-62

Oil Transporter Unknown McWood Corp.

Gas Transporter None

Remarks:

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

Approved: DEC 17 1962, 19.

Max Pray

(Company or Operator)

By:

(Signature)

Title Geologist - Agent

Send Communications regarding well to:

Name Warren Pickering

2207 First Natl. Bldg.

Address Oklahoma City 2, Oklahoma

OIL CONSERVATION COMMISSION

By:

Title

OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION	
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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 <b>Max Pray</b>				Lease <b>Federal (NM 040750-B)</b>		Well No. <b>2</b>	
Unit Letter <b>B</b>	Section <b>30</b>	Township <b>15 South</b>	Range <b>29 East</b>		County <b>Chaves</b>		
Pool <i>under</i> <b>Round Tank - San Andres</b>					Kind of Lease (State, Fed, Fee) <b>Federal</b>		
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>30</b>	Township <b>15 South</b>	Range <b>29 East</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McWood Corporation</b>			Address (give address to which approved copy of this form is to be sent) <b>306 V &amp; J Tower Midland, Texas Attention: Mr. R. L. McPherson</b>				

Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>	Date Connected	Address (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:

**Casing head gas is being used to fire National 4' X 24' Heater-Treater.  
Excess gas is currently too small in amount to justify a gas purchase  
contract. Gas is being stacked.**

REASON(S) FOR FILING (please check proper box)

New Well ..... ☒  
Change in Transporter (check one)  
Oil ..... ☐ Dry Gas ..... ☐  
Casing head gas ..... ☐ Condensate ..... ☐

Change in Ownership ..... ☐  
Other (explain below)

**RECEIVED**

**DEC 17 1962**

**D. C. C.  
ARTESIA, OFFICE**

Remarks

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

Executed this the **15th** day of **December**, 19 **62**

OIL CONSERVATION COMMISSION		By
Approved by	<i>M. L. Armstrong</i>	<i>Karen L. Lisking</i>
Title		<b>Geologist - Agent</b>
Date		Company
<b>DEC 17 1962</b>		<b>Max Pray</b>
		Address
		<b>2207 First National Building Oklahoma City 2, Oklahoma</b>