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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico(Form C-104)
Revised 7/1/57

DEC 17 1962

REQUEST FOR (OIL) - (XXX) 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 first 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

State "A"

Well No. 2

in SE 1/4

SW 1/4

(Company or Operator)

N

Sec. 30

T. 15 S

R. 29 E

Round Tank - San Andres

Pool

Unit Letter

Chaves

County Date Spudded 11-21-62

(1:30 PM)

Date Drilling Completed

11-24-62

(6:45 PM)

Please indicate location:

Elevation 3740 K.B.

Total Depth 3072'

FBTD

Top Oil/Gas Pay 2903'

Type of Prod. Form.

San Andres

PRODUCING INTERVAL -

Perforations None

Open Hole 3014'-3072'

Depth

3014'

Depth

3010

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): 41 bbls oil, 128 bbls water in 24 hrs, 0 min. Choke Size F

GAS WELL TEST -

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

Method of Testing (pitot, back valve, 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): 40,000# sand, and 21,970 gallons gelled salt water

Casing _____ Tubing _____ First new _____ December 5, 1962

Press. _____ Press. _____

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)

OIL CONSERVATION COMMISSION

By: _____

OIL AND GAS INSPECTOR

Title _____

By: _____

(Signature)

Geologist - Agent

Title _____

Send Communications regarding well to:

Name: _____

Warren Pickering

Address: _____

2407 First Natl. Bldg
Oklahoma City 2, Oklahoma

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NUMBER OF COPIES RECEIVED	
CONTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

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 Max Pray				Lease State "A"		Well No. 2	
Unit Letter N	Section 30	Township 15 South	Range 29 East		County Chaves		
Pool Round Tank - San Andres					Kind of Lease (State, Fed, Fee) State "A" (E-6061)		
If well produces oil or condensate give location of tanks			Unit Letter K	Section 30	Township 15 South	Range 29 East	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> McWood Corporation				Address (give address to which approved copy of this form is to be sent) 306 V & J Tower Midland, Texas Attention: Mr. R. L. McPherson			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
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 being used to fire National 4' X 24' Heater-Treater.
Excess gas is currently too small in amount to justify a sales contract
and 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

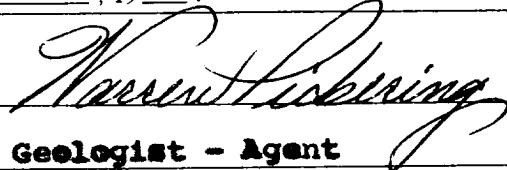
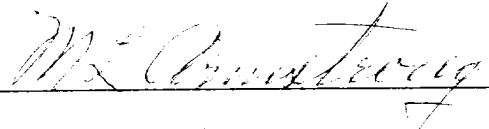
DEC 17 1962

**D. D. C.
ARTESIAL 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 		Title Geologist - Agent
Title OIL AND GAS INSPECTOR		Company Max Pray
Date DEC 17 1962		Address 2207 First National Building Oklahoma City 2, Oklahoma