(Form C-104) (Revised 7/1/52)

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

X

REQUEST FOR (OIL) - (GAS) ALLOWABLE

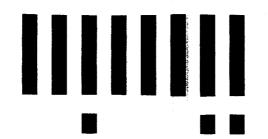
New Well

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

**RECOMPANY REQUESTING TO SEC. 12			NG AN ALLOWABLE	FOR A WELL KNOW	/N AS: 198	0/S and	1980/E
			- Dup	well No	, in	1/4	SE 1/4,
	J - Sec	12 -	T 178 R	28E NAGRA	Wildon't	. <u>_</u>	
(=							
	Eddy		County. Date Spudd	ed 4/25/55	Date Completed	8/3/5	5
	se indicate		•	,,	- Lie Completed		E
		1					
ļ			Elevation	Total Depth.	24921	P.B. 246	571
							•
			Top oil/gas pay.	2432: Name 2434-45 with	of Prod. Form	, San Ar	adres
		,	C t b t it	2434-45 with	44 holes a	nd reper	rforated
			Casing Perforation	ons: Stout with Do	Mell Chemi	cal 7" s	runor
Ì	0		Depth to Casing	shoe of Prod. String	21102) ir	
-							
			Natural Prod. Te	st. 12 gal per h	our		30000
			1 1 9 ist	h	10		
			based on 14	4. gal. www.Oil in	12 Hr	5	Mins.
• • • • • • • • • • • • • • • • • • • •	******************		Test after minhre	nd sandfracture	50		PO DD
Casing	and Cement	ing Record					
Size	Feet	Sax	Based on 50	bbls. Oil in	24 Hrs	5	Mins.
			Natural flo	ow under 365# pr	ressure on	intermit	tter.
3-5/8	288	30	Gas Well Potenti	ial			
-			Size choke in inc	hes			
7#OD	2492-	40			*****		
			Date first oil run	to tanks or gas to Transmi	ission system:	8/3/55	
			+ + · · · · · · · · · · · · · · · · · ·			•	
			Transporter takin	g Oil or Gas:Artesi	a Pipe Lin	e Compar	ly (Truc
			•				
1arks:		••••••	••••••		***************************************	***********	

					••		
I hereb	y certify tha	at the inform	nation given above is	true and complete to the b	est of my knowled	døe.	
			=	G. Kelle	•	•	
		*****	, 13		(Company or Opera		
OH	CONSED	VATION C	OMMISSION	By:	L Si-	2	
	2) CONSER			•	(Signature)	7 T"	
4.1	7. ン	Mari	10000	T/itleAge			
				Send Com	imunications rega	rding well to	:
		••••	•••••	Send Com	munications rega	**	







Job separation sheet

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico



MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See additional instructions in the Rules and Regulations of the Commission.

- Ruics and Regulation	Indicate Nature of Report by Checking Be	dow				
REPORT ON BEGINNING DRILLING OPERATIONS	REPORT ON RESULT OF TEST OF CASING SHUT-OFF	REPORT ON REPAIRING WELL				
REPORT ON RESULT OF PLUGGING WELL	REPORT ON RECOMPLETION OPERATION	REPORT ON (Other) Sandfracture				
	August 3, 1955	Artesia, New Mexico				
Following is a report on the work	done and the results obtained under the heading n					
(Company or Op	erator)	Superior (E-486)				
(Contractor	, Well No1	in the NW				
	Wildcat - Pool,					
The Dates of this work were as folows:	August 1, 1955					
was,) (was not) submitted on Form C-102 on	(Cross out incorrect words), 19				
and approval of the proposed plan (was)	(was not) obtained.	, , , , , , , , , , , , , , , , , , , ,				
otal Depth 24921 P	ractured by Dowell Chemical was Approximate production after B 2467. Sandfractured 2432 and up to 7200#, broke down a	r this treatment 50 BOPD.				
Vitnessed by. C. V. Miller	Contractor					
(Name)	(Company)	(Title)				
pproved: OIL CONSERVATION CO	OMMISSION I hereby certify that to the best of my known to the best of my kno	the information given above is true and complete owledge.				
(Name)	Name Position Agent	New				
	`	Kelley Stout				
(Title)	(Date) Address C/O	Juanita Denton, Box 308				