

REQUEST FOR (OIL) - (GAS) ALLOWABLE

AUG 17 1960

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.

Artesia, New Mexico

8-11-60

(Place)

(Date)

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

Hondo-Western-Yates

State 'A'

28

NW

SW

(Company or Operator)

L

Sec. 25

T. 17-S

(Lease)

28-E

NMPM.

Empire Abo Undesignated

Pool

Unit Letter

Eddy

County. Date Spudded. 7-26-60

Date Drilling Completed

8-10-60

Elevation 3661

Total Depth

6316

PBTD

6280

Top Oil/Gas Pay

6123

Name of Prod. Form.

Abo

PRODUCING INTERVAL -

Perforations

6196 - 6218

Open Hole

Depth

6306

Depth

6121

OIL WELL TEST -

Natural Prod. Test:

bbls. oil,

bbls water in

hrs,

Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used):

280

bbls. oil,

0

bbls water in

10 hrs,

0

min. Size

16/64"

GAS WELL TEST -

Natural Prod. Test:

MCF/Day; Hours flowed

Choke Size

Tubing, Casing and Cementing Record

Size

Feet

Sax

8-5/8"	725'	375
5-1/2"	6306'	170 Units HYS 400 150 sks. Incer 1/2 gel.
2" EUE	6121'	

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): 3,000 gallons 15% reg. acid with DS-50 added.

Casing Tubing

Date first new

Press. Packer

530

oil run to tanks

8-10-60

Oil Transporter

Service Pipe Line Company

Gas Transporter

Remarks:

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

Approved. 8-11-60, 19

Hondo Oil & Gas Company

(Company or Operator)

By:

A. J. Deane by J. M. Edgman
(Signature)

Title

Dist. Prod. Supt.

Send Communications regarding well to:

Name

A. J. Deane

Address

Box 125, Artesia, New Mexico

OIL CONSERVATION COMMISSION

By:

OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION	
ARTESIA DISTRICT OFFICE	
No. Copies Received	7
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