

REQUEST FOR (OIL) - (GAS) ALLOWABLE MAY 16 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 QUADRUPPLICATE to the same District Office to which Form C-101 was submitted. 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
(Place)

May 13, 1960
(Date)

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

Simclair Oil & Gas Company H. Yates "D" ANG, Well No. 3, in SW $\frac{1}{4}$, SW $\frac{1}{4}$,
(Company or Operator) (Lease)
E, Sec. 33, T. 17N, R. 28E, NMPM, Undesignated (E, pipe line Rpt) Pool
Unit Letter

Edgy

Please indicate location:

D	C	B	A
E	F	G	H
X			
L	K	J	I
M	N	O	P

County. Date Spudded 4-13-60 Date Drilling Completed 5-7-60
Elevation 3674 Total Depth 6150 FBTD 6085

Top Oil/Gas Pay 5800 Name of Prod. Form. Alb

PRODUCING INTERVAL -

Perforations 6038-51, 6060-73
Open Hole _____ Depth _____
Casing Shoe 6150 Depth Tubing 6085

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ 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): 131 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 18/64"

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>6-5/8</u>	<u>1003</u>	<u>150</u>
<u>4-1/2</u>	<u>6150</u>	<u>800</u>
<u>2"</u>	<u>6085</u>	<u>Thg</u>

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): 500 gals mud acid & 3000 gals regular acid

Casing Tubing _____ Date first new _____
Press. Packer Press. 1504 oil run to tanks May 11, 1960

Oil Transporter Service Pipe Line Company

Gas Transporter None - Gas Flared - no connector

Remarks: _____

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

Approved: May 16 1960, 19_____

Simclair Oil & Gas Company
(Company or Operator)

By: Fred Burns
(Signature)

OIL CONSERVATION COMMISSION

By: W. A. Grissett

Title: Dist Supt

Title: 2nd 17N GAS INSPECTOR

Send Communications regarding well to:

Name: Fred Burns

Address: 520 E Broadway, Hobbs, New Mexico

Originals: OCC-A, Texas; on: State Land Office;
cc: NPD, M, File

OIL QUALIFICATION COMPLETION	
APPLICANT DIST. OF TOWN	
Full Qualification	7
Partial Qualification	
Not Qualified	
Other	
Remarks	
Signature	
Date	
Inspector	
Station	
Vehicle	
Engine	
Transmission	
Drivetrain	
Brakes	
Steering	
Lighting	
Other	