

REQUEST FOR (OIL) - (GAS) ALLOWABLE

RECEIVED

JUL 11 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.

Hobbs, New Mexico
(Place)

July 6, 1960
(Date)

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

Sinclair Oil & Gas Company **M. Yates "B" ABC**, Well No. **11**, in **NE** $\frac{1}{4}$ **NE** $\frac{1}{4}$,
(Company or Operator) (Lease)
A, Sec. **33**, T. **17S**, R. **28E**, NMPM., **Empire Abo** Pool
Unit Letter

Please indicate location:

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

990' 2/8 & 660' 2/8

Tubing, Casing and Cementing Record

Size	Feet	Size
8-5/8	1000	550
4-1/2	6170	1000
2-3/8	6019	Tubing

County. Date Spudded **6-10-60** Date Drilling Completed **7-2-60**
Elevation **3678** Total Depth **6170** PBTD **6119**
Top Oil/Gas Pay **5868** Name of Prod. Form. **Abo**

PRODUCING INTERVAL -

Perforations **6053-69 & 6074-87**
Open Hole Depth Casing Shoe **6170** Depth Tubing **6019**

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): **63** bbls. oil, **0** bbls. water in **7** hrs, **0** min. Size **12/64"**

GAS WELL TEST -

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

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 of 15% LST Acid**

Casing Press. **Packer** Tubing Press. **7400** Date first new oil run to tanks **July 4, 1960**

Oil Transporter **Service Pipeline Company**

Gas Transporter **Frontier Natural Gasoline Company**

Remarks: _____

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

Approved **JUL 11 1960**, 19____

Sinclair Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: **M. L. Armstrong**

Title **Oil and Gas Inspector**

By: _____
(Signature)

Title **Dist. Supt.**

Send Communications regarding well to:

Name **Fred Burns**

Address **530 E Broadway, Hobbs, N.M.**

OIL CONSERVATION COMMISSION

ARTESIA DISTRICT OFFICE

No. Copies Received 7

DISTRICT OFFICE

Oil Field

Oil No. 1

Oil No. 2

STATE OF

U. S. G. S.

TRANSPORTER

FILE

BUREAU OF MINES