

MAR 30 1962

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

3-27-62 Hobbs, N.M.

(Place)

(Date)

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

Cactus Drilling Company Pan Am St. "C", Well No. 2, in NE 1/4 NW 1/4,

(Company or Operator)

(Lease)

C Sec 34, T17s, R11 28e, NMPM., Artesia Pool

Unit Letter

Eddy

County. Date Spudded Feb. 5 1962 Date Drilling Completed Feb. 26, 62

Elevation 3674 GL Total Depth 2178 PBD 2097

Please indicate location:

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

Top Oil/Gas Pay 2038 Name of Prod. Form. Premier

PRODUCING INTERVAL -

Perforations 2038-2048

Open Hole Depth Casing Shoe 2105 Depth Tubing 2040

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 41 bbls. oil, 0 bbls water in 24 hrs, min. Size 32/64

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size Feet Sds

8 5/8	571	50
5 1/2	2114	100
2	2040	

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day: Hours flowed

Choke Size Method of Testings:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 30,000 gal lease oil 33,000# frac sand

Casing Tubing Date first new Press. 120 oil run to tanks March 21, 1962

Oil Transporter Continental Pipe Line Co.

Gas Transporter Abo Gasoline Plant Pan American Petr. Corp.

Remarks:

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

Approved: MAD 20 1962, 19

Cactus Drilling Company

(Company or Operator)

By:

Geo. W. Baker

(Signature)

OIL CONSERVATION COMMISSION

By:

M. L. Armstrong

Title

OIL AND GAS INSPECTOR

Title Vice-President

Send Communications regarding well to:

Name Cactus Drilling Company

Address P.O. Box 1826, Hobbs, N.M.

OIL COMMISSION COMMISSION	
REPORT OF THE COMMISSION	
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DISTRIBUTION	
SANTA FE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRORATION 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 <b>Cactus Drilling Company</b>				Lease <b>Pan Am "C"</b>		Well No. <b>2</b>	
Unit Letter <b>C</b>	Section <b>34</b>	Township <b>17s</b>	Range <b>34e</b>		County <b>Eddy</b>		
Pool <b>Artesia</b>				Kind of Lease (State, Fed, Fee) <b>State</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>B</b>	Section <b>34</b>	Township <b>17s</b>	Range <b>34e</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Continental Pipe Line Co.</b>				Address (give address to which approved copy of this form is to be sent)  <b>/ Artesia, New Mexico</b>			
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"/>  <b>Abo Gasoline Plant c/o Pan American Petr. Corp.</b>		Date Connected		Address (give address to which approved copy of this form is to be sent)  <b>P.O. Box 68, Hobbs, N.M.</b>			
If gas is not being sold, give reasons and also explain its present disposition:							

**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**

**MAR 30 1962**

**O. E. G.  
ARTESIA OFFICE**

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

OIL CONSERVATION COMMISSION		By <i>Geo. W. Baker</i>	
Approved by <i>M. L. Armstrong</i>		Title <b>Vice-President</b>	
Title <b>OIL AND GAS INSPECTOR</b>		Company <b>Cactus Drilling Company</b>	
Date <b>MAR 30 1962</b>		Address <b>P.O. Box 1826, Hobbs, N.M.</b>	