

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.

LOCO HILLS, NEW MEXICO January 29, 1959
(Place) (Date)

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

General American Oil Co. of Texas
and Malco Refineries, Inc. (Company or Operator) in Section 10, Township 16-S, Range 30-E, NMPM, Well No. 6, in NW 1/4, NE 1/4, (Lease)

B Unit Letter, Sec. 10, T. 16-S, R. 30-E, NMPM, UNDESIGNATED Pool

Eddy

County. Date Spudded 12-17-58 Date Drilling Completed 1-22-59

Please indicate location:

Elevation 3852' Total Depth 2940' PBD

Top Oil/Gas Pay 2909' Name of Prod. Form. PREMIER (Basal Grayburg)

PRODUCING INTERVAL -

Perforations

Open Hole 2909' - 2920' Depth 2905' Depth Tubing 2884'

OIL WELL TEST - BAILING TEST

Natural Prod. Test: 2 gal. oil, 0 bbls water in 2 hrs, 0 min. Choke Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 44.16 bbls oil, 0 bbls water in 4 hrs, 0 min. Choke Size 3/4"

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): 500 gals HCl, 54,000 gals oil, 90,000# sand

Casing 200# Tubing 50# Date first new oil run to tanks 1-29-59

Oil Transporter MALCO REFINERIES, INC.

Gas Transporter None Available

Remarks:

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

Approved, 19

GENERAL AMERICAN OIL COMPANY OF TEXAS

(Company or Operator)

OIL CONSERVATION COMMISSION

By: R. J. Heard (Signature)

Title: District Superintendent

Send Communications regarding well to:

Name: GENERAL AMERICAN OIL COMPANY OF TEXAS

Address: BOX 436, Loco Hills, N. M.

By: M. L. Armstrong
Title:

