

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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 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.

Roswell, New Mexico February 27, 1962
(Place) (Date)

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

Shell Oil Company / Henshaw Deep Unit, Well No. 4, in. SW 1/4 SW 1/4,
(Company or Operator) (Lease)

M, Sec. 13, T. 16S, R. 30E, NMPM., Henshaw-Wolfcamp Pool
Unit Letter

Eddy County, Date Spudded 12-16-61 Date Drilling Completed 2-14-62

Please indicate location:

R-30-E

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

Elevation 3869' DF Total Depth 9600' PBD 9095'

Top Oil/Gas Pay 8953' Name of Prod. Form. Wolfcamp

PRODUCING INTERVAL -

T Perforations 8953' - 8959' & 8963' - 8966'
Open Hole - Depth - Depth Casing Shoe 9128' Depth Tubing 8933'

OIL WELL TEST -

S 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): 175 bbls. oil, 9 bbls water in 24 hrs, _____ min. Size 18/64"

GAS WELL TEST -

660' FSL & 660' FWL, Sec. 13 Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
10 3/4"	518	175
7 5/8"	3018	350
4 1/2"	9115	350
2"	8921	

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): 200 gallons 15% HDA & 3000 gallons 15% NEA

Casing _____ Tubing _____ Date first new _____
Press. - Press. 250-325 oil run to tanks February 23, 1962

Oil Transporter The Permian Corporation

Gas Transporter None

Remarks: _____

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

Approved _____, 19____ Shell Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong Title: District Exploitation Engineer

Title: Oil and Gas Engineer Send Communications regarding well to:

Name: Shell Oil Company

Address: Box 1858, Roswell, New Mexico

W

OIL CONSERVATION COMMISSION	
NAME	_____
ADDRESS	_____
CITY	_____
STATE	_____
ZIP	_____
DATE	_____
SIGNATURE	_____
PRINTED NAME	_____
TELEPHONE	_____
TELETYPE	_____
FAX	_____
E-MAIL	_____
OTHER	_____