

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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 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.

Monahans, Texas

January 30, 1961

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Standard Oil Co. Of Texas, A Division Of California Well No. 15-10, in SE 1/4 NW 1/4,  
(Company or Operator) (Lease) Oil Co.

F ✓, Sec. 10, T. 16S, R. 31E, NMPM, North Square Lake GB Pool

Unit Letter

Eddy

County. Eddy Date Spudded December 22, 1960 Date Drilling Completed January 4, 1961

Please indicate location:

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

Elevation 4173 OL Total Depth 3790 PBD 3754

Top Oil/Gas Pay 3690 Name of Prod. Form. Grayburg (Premier)

PRODUCING INTERVAL -

Perforations 3690-3701, 3717-3730 w/4 jets/ft

Open Hole - Depth 3790 Casing Shoe 3707 Depth 3707 Tubing

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): 423 bbls. oil, 0 bbls water in 24 hrs, - min. Size 1 Choke

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): Free w/30,000 gals crude w/1/2 # 34/gal on csk.

Casing 340 Tubing 125 Date first new January 23, 1961  
Press. 340 Press. 125 oil run to tanks

Oil Transporter Continental Pipeline Company

Gas Transporter No pipeline connection at present

Remarks: Surface string circulated estimate 35' and to surface. Oil string cut w/two stages w/collar at 1018'. First stage thru shoe 200' and second stage thru collar w/225' and circ trace cut to surface.

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

Approved: FEB 3 1961, 19-

Standard Oil Company of Texas  
A Division Of California Oil Company  
(Company or Operator)

OIL CONSERVATION COMMISSION

By: C. F. Dwyer (Signature)

Title: District Engineer

Send Communications regarding well to:  
Standard Oil Company of Texas  
A Division Of California Oil Company

Name: Dwain S. Monahans, Texas  
Address: -

By: M. L. Armstrong  
Title: OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION  
ARTESIA DISTRICT OFFICE

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**NEW MEXICO OIL CONSERVATION CO. SSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM E-20**  
 (Rev. 7-60)  
**JAN 31 1961**

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Standard Oil Co. of Texas, A Division of California Oil Co.</b>				Lease <b>Federal 15-10</b>	
Unit Letter <b>F</b>	Section <b>10</b>	Township <b>16S</b>	Range <b>31E</b>	County <b>Elddy</b>	
Pool <b>North Square Lake Grayburg</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>	
If well produces oil or condensate give location of tanks			Unit Letter <b>D</b>	Section <b>10</b>	Township <b>16S</b>
				Range <b>31E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Continental Pipeline Co.</b>				Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 367 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>None</b>			Date Connected	Address (give address to which approved copy of this form is to be sent)	

If gas is not being sold, give reasons and also explain its present disposition:

**No Market, gas used in pumping unit engines & flared**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Remarks

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

Executed this the **30th** day of **January**, 19 **61**.

**OIL CONSERVATION COMMISSION**

Approved by

*M. L. Armstrong*  
**OIL AND GAS INSPECTOR**

Title

Date

**FEB 3 1961**

By

**C. F. Dwyer**

*C. F. Dwyer*

Title

**District Engineer**

Company

**Standard Oil Co. of Texas, A Division of California Oil Co.**

Address

**Drawer 8  
Muskogee, Texas**

**RECEIVED**  
**JAN 31 1961**  
**O. C. C. OFFICE**

FEB 1 1906  
 DEPT. OF THE INTERIOR  
 BUREAU OF LANDS

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