

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

RECEIVED  
JUL 10 1961  
(Form C-104)  
Revised 7/1/57  
O. C. C.  
ARTESIA, OFF New Well  
Recompletion

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.

Midland, Texas  
(Place)

July 6, 1961  
(Date)

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

DOB Oil Properties, Inc. Federal A, Well No. 2, in SE 1/4 SE 1/4,  
(Company or Operator) (Lease)

P. Sec. 20, T. 16S, R. 31E, NMPM, Square Lake Pool  
Unit Letter

Eddy

County. Date Spudded 5-6-61 Date Drilling Completed 5-19-61

Please indicate location:

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

Elevation 3983 Total Depth 3582 PBD 3572

Top Oil/Gas Pay 3345 Name of Prod. Form. Metex & Lovington

PRODUCING INTERVAL - 3354-3358

Perforations 3550-3562

Open Hole Depth Casing Shoe 3582 Depth Tubing 3340

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): 55.22 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size Choke Pumping

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): Frac 13000 gal & 70000# sand

Casing Tubing Date first new

Press. Pump oil run to tanks 6-30-61

Oil Transporter Continental Oil Company

Gas Transporter Phillips Petroleum Company

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	351	275
5-1/2	3582	175
2	3340	

Remarks:

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

Approved JUL 10 1961, 19.

DOB Oil Properties, Inc.  
(Company or Operator)

By: (Signature)  
(Signature)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: OIL AND GAS INSPECTOR

Title: Agent

Send Communications regarding well to:

Name: DOB Oil Properties, Inc.

Address: Box 953, Midland, Texas

OIL CONSERVATION COMMISSION		
ARTESIA DISTRICT OFFICE		
No. Copies Required 4		
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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**RECORDED - YIF**  
(Rev. 7-60)  
**JUL 10 1961**  
**O. C. C.**  
**ARTESIA, OFFICE**

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>NOB Oil Properties, Inc.</b>				Lease <b>Federal A</b>		Well No. <b>2</b>	
Unit Letter <b>P</b>	Section <b>20</b>	Township <b>16S</b>	Range <b>31E</b>	County <b>Ford</b>			
Pool <b>Spring Lake</b>				Kind of Lease (State, Fed, Fee) <b>Fed</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>G</b>	Section <b>20</b>	Township <b>16S</b>	Range <b>31E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent) <b>Box 3119, Midland, Texas</b>			
<b>The Permian Corporation</b>							

Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected <b>6-28-61</b>	Address (give address to which approved copy of this form is to be sent) <b>Box 4187, Midland, Texas</b>
<b>Midland Petroleum Company</b>			

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

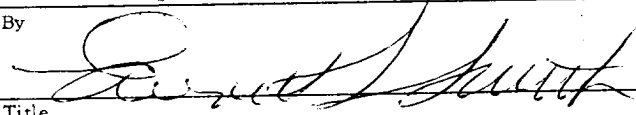
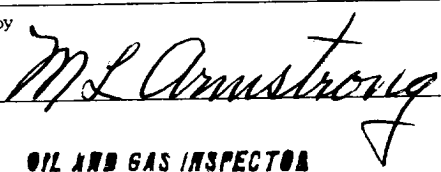
**REASON(S) FOR FILING** (please check proper box)

New Well ☒ Change in 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 6th day of July, 1961.

OIL CONSERVATION COMMISSION		By 
Approved by 	Title <b>Agent</b>	Company <b>NOB Oil Properties, Inc.</b>
Title <b>OIL AND GAS INSPECTOR</b>	Address <b>Box 953, Midland, Texas</b>	
Date <b>JUL 10 1961</b>		