

## 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.

**Hobbs, New Mexico**

**1-30-62**

(Place)

(Date)

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

**Western Oil Fields, Inc.**

**Grier**

Well No. **14**

in **NE**

**SE**

**1/4**

(Company or Operator)  
**I 20**

**16S**

(Lease)  
**31E**

**Square Lake**

Pool

Unit Letter  
**Eddy**

County Date Spudded **11-9-61**

Date Drilling Completed **12-29-61**

Elevation **3980 1/2**

Total Depth **3610**

PBTD

**3604**

Please indicate location:

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

**1980 N - 660 W.**

Top Oil/Gas Pay **3562**

Name of Prod. Form. **San Andres**

PRODUCING INTERVAL -

Perforations **3562-3576 (4 Shots/ft)**

Open Hole

Depth

Casing Shoe **3610**

Depth

Tubing **3590**

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **19** bbls. oil, **Trace** bbls. water in **24** hrs, **0** min. Choke Size **Pump**

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 Acid, 15,000 gals ref. oil/30,000 lbs. sand**

Casing Press. **0**

Tubing Press. **20**

Date first new

**1-29-62**

oil run to tanks

Oil Transporter

**The Permian Corp., Midland, Texas**

Gas Transporter

Remarks:

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

Approved **FEB 2 1962**

**Western Oil Fields, Inc.**

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

*M. L. Armstrong*

Title

**OIL AND GAS INSPECTOR**

By:

*Paul White*

(Signature)

Title

**Petr. Engr.**

Send Communications regarding well to:

Name

**Western Oil Fields, Inc.**

Address

**Box 1147, Hobbs, New Mexico**

CITY OF NEW YORK	
DEPARTMENT OF SOCIAL SERVICES	
FAMILY COURT	
IN SENATE	January 1, 1964
REPORT OF THE	COMMISSIONER OF SOCIAL SERVICES
ON THE	ADMINISTRATIVE AND FINANCIAL
OPERATIONS OF THE	FAMILY COURT
FOR THE YEAR	1963
BY THE COMMISSIONER OF SOCIAL SERVICES	
JAMES J. HOGAN	
COMMISSIONER OF SOCIAL SERVICES	
NEW YORK	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55 V E D

(File the original and 4 copies with the appropriate district office)

FEB 2 1962

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

D. C. C.  
ARTESIA, OFFICE

Company or Operator Western Oil Fields, Inc. Lease Grier

Well No. 14 Unit Letter I S 20 T 16S R 31E Pool Square Lake

County Eddy Kind of Lease (State, Fed. or Patented) Fed

If well produces oil or condensate, give location of tanks: Unit J S 20 T 16S R 31E

Authorized Transporter of Oil or Condensate The Permian Corp.

Address Box 3119, Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas None

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:

T.S.T.M.

Reasons for Filing: (Please check proper box) New Well New Well (X)

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership ( ) Other ( )

Remarks: (Give explanation below)

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 62

By Paul White

Approved FEB 2 1962 19

Title Petroleum Engineer

OIL CONSERVATION COMMISSION

Company Western Oil Fields, Inc.

By M. L. Armstrong

Address Box 1147

Title OIL AND GAS INSPECTOR

Hobbs, New Mexico