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NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104)
Rev1sed 7/1/57 Santa Fe, New Meano

REQUEST FOR (OIL) - (GAS) ALLO

C' OF New Well RTESIA Recompletion

Address 323 Carper Bldg., Artesia, N. Mex.

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 recompletio. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gai must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico, Feb. 27, 1961, WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Martin Yates, III. Dooley-State Abo ST, Well No. 2 in NW 4 SE 4 (Company or Operator) J Sec. 36 T 17 8 R 27 E NMPM., Empire Abo Pool Eddy County. Date Spudded 2#11#61 Date Drilling Completed 2~26~61..... Elevation 3654 KB _______Total Depth 5970 PBTD 5929 Please indicate location: Top Oil/Gas Pay 5749 Name of Prod. Form. Abo reef B A PRODUCING INTERVAL Note: Measurements from Kelly Bushing Perforations 5749' to 5766' E F G Ħ Depth Casing Shoe 5970 5591 Open Hole Tubina OIL WELL TEST -K I 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 0 M load oil used): 99 bbls, oil, 11 bbls water in 4 hrs, min. Size 3/4 GAS WELL TEST -From S & E LinesNatural Prod. Test. MCF/Day; Hours flowed ____ Choke Size_____ 1650 Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):_____ SAX Size Feet Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Method of Testing: Gire 8 5/8 950 Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 511 5970° 600 200 Date First new oil run to tanks Service Pipe Line Co. Phillips Petroleum Co. I hereby certify that the information given above is true and complete to the best of my knowledge. Approved MAR 1 1961 19..... OIL CONSERVATION COMMISSION (Signature) Geologist Send Communications regarding well to: ML AND GAS INSPECTOR Name Martin Yates, III Title