

**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mexico

RECEIVED  
(Form C-104)  
Revised 7/1/57  
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 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.

Artesia, New Mexico 8-29-63  
(Place) (Date)

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

George A. Chase Jeffiers Well No. 1 in SE 1/4 SW 1/4,  
(Company or Operator) (Lease)  
144 N Sec. 27 T. 16S R. 31E NMPM, East Square Lake Pool  
Eddy County

Date Spudded 6-28-63 Date Drilling Completed 7-15-63  
Elevation 4032 Total Depth 3773 PBTD 3773  
Top Oil/Gas Pay 3570 - 3730 Name of Prod. Form. Petex Lovington

Please indicate location:

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

PRODUCING INTERVAL -  
Perforations 3576-3612 & 3730-3738  
Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe 3773 Depth \_\_\_\_\_ Tubing 3760

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): 14 bbls. oil, 60 bbls water in 24 hrs, 0 min. Choke Size Swabbing

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: \_\_\_\_\_

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
<u>13 3/8"</u>	<u>38'</u>	<u>2 yds.</u>
<u>5 1/2"</u>	<u>3773'</u>	<u>150 sks.</u>
<u>2"EUE</u>	<u>3760'</u>	<u>50 sks.</u>

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 54,000 sand, 200 Ebls. slick water & 1500 gals acid  
Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks 8-1-63  
Oil Transporter Continental Pipe Line Company  
Gas Transporter \_\_\_\_\_

Remarks: \_\_\_\_\_

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

Approved: AUG 30 1963, 19. George A. Chase  
(Company or Operator)

**OIL CONSERVATION COMMISSION**

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

By: \_\_\_\_\_ (Signature)  
Title: Owner  
Send Communications regarding well to:  
George A. Chase  
Name: \_\_\_\_\_  
Address: 808 Clayton, Artesia, N.M.

# WILDLIFE CONSERVATION COMMISSION ARTESIA DISTRICT OFFICE

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5

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

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>George A. Chase</b> ✓				Lease <b>Jeffiers</b> ✓		Well No. <b>1</b> ✓	
Unit Letter <b>N</b> ✓	Section <b>27</b> ✓	Township <b>16S</b>	Range <b>31E</b>	County <b>Eddy</b>			
Pool <b>East Square Lake</b>				Kind of Lease (State, Fed Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>N</b>	Section <b>27</b>	Township <b>16S</b>	Range <b>31E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Continental Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>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"/>			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:

**Not enough to measure**

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

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


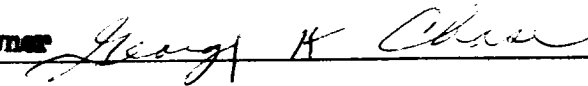
Change in Ownership ..... ☐  
 Other (explain below)

**RECEIVED**  
**AUG 30 1963**  
**D. C. C.**  
**ARTESIA, OFFICE**

Remarks  <b>Completed as a flowing oil well 8-1-63</b>
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The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **29** day of **August**, 19 **63**

OIL CONSERVATION COMMISSION		By
Approved by 	Title <b>Owner</b> 	
Title <b>OIL AND GAS INSPECTOR</b>	Company <b>George A. Chase</b>	
Date <b>AUG 30 1963</b>	Address <b>808 Clayton, Artesia, New Mexico</b>	