

NEW XICO OIL CONSERVATION COMM.  
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE SEP 1 1957  
New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-104 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

9-12-57

(Place)

(Date)

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

KINCAID & WATSON

ATLANTIC STATE

Well No. 4, in SE 1/4 SW 1/4,

(Company or Operator)

(Lease)

N 8, Sec. 8, T. 17S, R. 29E, NMPM., CAVE Pool

Unit Letter

EDDY

County. Date Spudded. 7-23-57

Date Drilling Completed

8-22-57

Elevation

Total Depth

2397

PBTD

2244

Please indicate location:

Top Oil/Gas Pay

2223

Name of Prod. Form.

PREMIER

PRODUCING INTERVAL -

Perforations 2223 - 2231

Open Hole

Depth

Casing Shoe

2249

Depth

Tubing

2183

OIL WELL TEST -

Natural Prod. Test: 2 bbls. oil, 0 bbls water in 24 hrs, min. Size

Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 15 bbls. oil, 0 bbls water in 24 hrs, min. Size

Choke

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size

Feet

Loss

8 5/8"

366

None

5 1/2"

2249

100

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): 20,000 Gal oil & 36,000 lbs. sand

Casing

Tubing

Date first new

Press.

200

100

oil run to tanks

9-7-57

Oil Transporter

TEXAS - NEW MEXICO PIPE LINE CO.

Gas Transporter

FRONTIER NATURAL GASOLINE CO.

Remarks: Frontier Natural Gasoline Company will take the excess gas from the separator.

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

Approved. SEP 12 1957, 19

KINCAID & WATSON

(Company or Operator)

By:

(Signature)

Title. AGENT

Send Communications regarding well to:

Name. KINCAID & WATSON

Address. Box 536, ARTESIA, NEW MEXICO

OIL CONSERVATION COMMISSION

By:

Title. OIL AND GAS INSPECTOR

No. Copies Received

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Operator

Wenta Co

Production of the

### Stain and Odor

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$$f = \frac{1}{2} \left( \frac{1}{\sqrt{2}} \right)^2 = \frac{1}{4}$$

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form O-110  
Revised 7/1/55  
**RECEIVED**

(File the original and 4 copies with the appropriate district office) **SEP 12 1957**

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Oil Cons. Comm.  
ARTESIA OFFICE

Company or Operator KINCAID & WATSON Lease ATLANTIC STATE

Well No. 4 Unit Letter N S 8 T 17S R 29E Pool CAVE

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

If well produces oil or condensate, give location of tanks: Unit K S 8 T 17S R 29E

Authorized Transporter of Oil or Condensate TEXAS-NEW MEXICO PIPELINE COMPANY

Address BOX 1510, MIDLAND, TEXAS  
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas FRONTIER NATURAL GASOLINE CO.

Address BOX 3908, ODESSA, TEXAS  
(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:

Reasons for Filing: (Please check proper box) New Well NEW WELL ( ☒ )

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

Change in Ownership ( ☐ ) Other ( ☐ )

Remarks: (Give explanation below)

**Texas- New Mexico Pipe Line Company will deliver the oil to the purchaser Sinclair Cruce Oil Company.**

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

Executed this the 12th day of SEPTEMBER 19 57

By *Gray Holmes*

Approved SEP 12 1957 19 57

Title AGENT

OIL CONSERVATION COMMISSION

Company KINCAID & WATSON

By *M L Armstrong*

Address Box 536, ARTESIA, NEW MEXICO

Title OIL AND GAS INSPECTOR

**OIL CONSERVATION COMMISSION**  
**ARTESIA DISTRICT OFFICE**

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| Transporter       |                  |  |
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