

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

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-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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

12-12-56

(Place)

(Date)

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

Sunray Mid-Continent Oil Company

Well No. **19**, in **NW 1/4 SE 1/4**

(Company or Operator)

(Lease)

Sec. **15**, T. **17-S**, R. **29-E**, NMPM, **Grayburg-Jackson** Pool

(Unit)

Eddy

County. Date Spudded **6-5-56**, Date Completed **12-7-56**

Please indicate location:

Elevation **3592** Total Depth **3282** P.B. **3090**

Top oil/gas pay **2387** Name of Prod. Form **Metex & San Andres**

Casing Perforations: **2387-2403 & open hole 2639-3090** or

Depth to Casing shoe of Prod. String **2639**

Natural Prod. Test..... BOPD

based on..... bbls. Oil in..... Hrs..... Mins.

Test after **Frac Job** **200** BOPD

Based on **260** bbls. Oil in **24** Hrs..... Mins.

Gas Well Potential.....

Size choke in inches **15/64**

Date first oil run to tanks or gas to Transmission system: **12-7-56**

Transporter taking Oil or Gas: **Texas & New Mexico Pipe Line Co.**

Casing and Cementing Record

Size Feet Sax

8 5/8	450	400
7"	2,639	125

Remarks: **Treated with acid and sand oil Fraced through Perforations 2387-2403 and open hole section 2639-3090.**

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

Approved....., 19.....

Sunray Mid-Continent Oil Company

(Company or Operator)

By: *[Signature]*

(Signature)

Title: **Hobbs Area Superintendent**

Send Communications regarding well to:

Name: **Sunray Mid-Continent Oil Co.**

Address: **Box 128 - Hobbs, New Mexico**

OIL CONSERVATION COMMISSION

By: *[Signature]*

Title

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