

REQUEST FOR (OIL) ALLOWABLE

~~NEW~~
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-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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 40° Fahrenheit.

Loco Hills, New Mexico Sept. 6, 1956
(Place) (Date)

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

General American Oil Co. of Texas Burch C, Well No. 7, in NE 1/4 SE 1/4,

I ☒ Company or Operator) Sec. 23, T. 17S, R. 29E, NMPM., Grayburg-Keely Pool
Unit Letter Eddy County, Date Spudded August 8, 1956, Date Completed Sept. 5, 1956

Please indicate location:

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

Elevation 3589' Total Depth 3358', P.B.

Top oil/gas pay 3316' Name of Prod. Form San Andres

Casing Perforations: or

Depth to Casing shoe of Prod. String 3281'

Natural Prod. Test 1.72 BOPD

based on 3 gals. Oil in 1 Hrs. 0 Mins.

& Fracture Test after acid 91 BOPD

Based on 91 bbls. Oil in 24 Hrs. 0 Mins.

Gas Well Potential

Size choke in inches 3/4"

Date first oil run to tanks or gas to Transmission system: September 5, 1956

Transporter taking Oil or Gas: Artesia Pipe Line Company

Casing and Cementing Record

Size Feet Sax

8 5/8"	384'	75
7"	2459'	100
5 1/2"	2408-3281	35
(liner)		

Remarks: This well Deepened from Grayburg-Jackson Pool to Grayburg-Keely Pool
Request cancellation of Grayburg-Jackson Allowable

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

Approved: _____, 19____

General American Oil Co. of Texas
(Company or Operator)

OIL CONSERVATION COMMISSION

By: *M. L. Armstrong*
Title _____

By: *R. J. Heard*
(Signature)

Title: Field Superintendent
Send Communications regarding well to:

Name: Same

Address: Box 416, Loco Hills, N. M.