

**NEW MEXICO  
OIL CONSERVATION COMMISSION**

TENTH & DALLAS STREETS  
ARTESIA, NEW MEXICO

June, 1966

No. A 65

**SUPPLEMENT TO THE OIL PRORATION SCHEDULE**

DATE 6/17/66

PURPOSE: ALLOWABLE ASSIGNMENT

Effective 6/2/66, an allowable of 45 barrels of oil  
per day or a total of 1305 barrels for the month is  
hereby assigned to the Sinclair Oil & Gas Co.,

P.M. Robinson B Unit III #3-P, 35-17-29, Undesignated  
Grayburg Jackson Pool.

Re-entry of P&A well.

MLA/jw

Sinclair Oil & Gas Co.,

TIM

OIL CONSERVATION COMMISSION

  
SUPERVISOR, DISTRICT NO. 2

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**LTR**



**Job separation sheet**

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

JUN 17 1966

O. C. C.  
ARTESIA, OFFICE

I. Operator  
Sinclair Oil & Gas Company

Address  
P. O. Box 1920, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Re-enter plugged & abandoned well
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Lease name change from F.M. Robinson B
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
F. M. Robinson B Unit III		3	Grayburg Jackson R3104	State, Federal or Fee Federal
Location				
Unit Letter	P	330	Feet From The East	Line and 330 Feet From The South
Line of Section	35	Township	17-S	Range 29-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipe Line Company	Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
None						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When To be connected when
	G	35	17S	29E	No	connected to permanent battle

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X								
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
6-26-39	6-14-66		3302		3298			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3542 GR	Grayburg		2502		2581			
Perforations					Depth Casing Shoe			
2612-2618 & 2634-2657					3302			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	8 1/4"		501		50			
	7"		2498		100			
	4 1/2"		3302		585			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

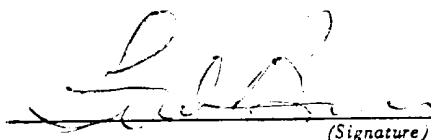
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6-2-66	6-14-66	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hr.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
70	60	10	112

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)

Superintendent

(Title)

June 15, 1966

(Date)

Orig. & 2cc: OCC-Artesia

cc: Regional Office

OIL CONSERVATION COMMISSION

JUN 17 1966

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY M. L. Armstrong

TITLE OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.