_ <b>.</b> .		. de		
Di	TRIBUTION			
BANTA FE	· · · · · · · · · · · · · · · · · · ·			
FILE		,		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	011			
	GAS			
PROBATION OFFICE				
OPERATOR				

NEW MEXICO OIL CONSERVA'I DN COMMISSION (Print: E) D Santa Fe. New Mexico RED Forlood 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWARLEN 31 1961

Newschierter,

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. Hobbs, New Mexico 5-19-61

				(Place)	••••••		(Date)
E ARE HE	REBY REG	QUESTI: Refini	NGAAN SHIDWARHE I ng Company (Lea , T	DARMAUMBLL KN	OWN AS: /	. SW	NE
(Comi	nany or Oper	tor)	(Lea	, Well No	······	in	
Ğ	Sec	17	., T. 18–S. R. 2	7-E NMPM.,	Empire Ac	•O	Pool
Unit Letter	F		,	4-24-61	xx	XXX	5-14-61
	Eady		County. Date Spudded	DF	Date Drilli	850	
Please	indicate loc	ation:	County. Date Spudded Elevation3430 Top Oil/Gas Pay	5393	Depth	PBTD	00
DC	В	A	Top Oil/Gas Pay	Name c	of Prod. Form.		
	5		PRODUCING INTERVAL -				
			Perforations 5393	-5400, 5408-542	26, 5446-54	.59	
E F		H	Open Hole	Depth Casino	shoe 962	1 Depth Tubing	5486
	X				· · · · · ·	<u> </u>	
LK	J	I	OIL WELL TEST -	-	-	_	_ Choke
		-	Natural Prod. Test:	bbls.oil,	bbls wate	r inhrs	,min. Size
			Test After Acid or Frac	ture Treatment (after	recovery of v	olume of oil e	qual to volume of
MN	0	Р	lorad oil used):		bbls water in	hrs,	min. Size
			GAS WELL TEST -				22/64
1980	+ <u>fr NL</u> -	1980	GAS WELL TEST -	-		-	
/ F0	OTAGE)		Natural Prod. Test:	MCF/Da	ay; Hours flowe	dChok	e Size
		ing Recor	<b>d</b> Method of Testing (pito	t, back pressure, etc	):		
Sire	Feet	Sax	Test After Acid or Frac	ture Treatment:	-	MCF/Dav: Hour	s flowed
			Choke SizeMet				
2"	5474	-		nou cr restring.			
			Acid or Fractur20,000	ent dive appunts of	materials used	such as acid	, water, oil, and
			381107				
			CasingTubing	200 Date first	new	5-9-61	
			CasingTubing PressPressSe	rvice Pipe Line	e Company		
			Oil Transporter	000			·····
			🗝 Gas Transporter				
marks:	This	is a du	al completion -		•	·····	
	Abo Ch	aik Biu	ff Draw Unit 4-P raw Unit 4-P	- Empire Abo C	/1⊥ ₩6₩3%	0000000	Fod one upil
•••••	······································	bluii…t	raw unit 4=P - K	ed Lake Fennsyl			tied gas werr
				11-4- 4-	the bast of my	knowledge	
			mation given above is t	Humble	Oil & Refi	ining Compa	any
I hereby	certify that	24 190					
I hereby pproved	certify that MAY	3 1 190	, 19	•••••••••••••••••••••••••••••••••••••••			·····
I hereby pproved	certify that MAY	3 T 190	, 19			or Operator)	/
pproved			COMMISSION		Company -Corne	or Operator)	
pproved			, 19	By:	Company Crzrz L (Sign		
pproved			, 19	By:	(Company Correct (Sign gent	or Operator)	well to:
pproved			, 19	By: 	(Company C > 2 > 2 L (Sign gent CemOynicati	or Operator)	onflany
pproved			, 19	By: Aj	(Company Correct (Sign gent	or Operator)	onflany
pproved			, 19	By: 	(Company C > 2 > 2 L (Sign gent CemOynicati	or Operator)	onflany

NUM .ECEIVED						
	NEW MEX	ICO OIL CON SANTA FE	SERVATION , NEW MEXI	COMMISSION CO	RE LIRES. 7-60)	
LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE				D AUTHORIZATI TURAL GAS	ION 31 1961	
OPERATOR	FILE THE ORIGINAL	AND 4 COPIES	WITH THE A	PPROPRIATE OFFICE	n L. E.	
Company or Operator Humble Qi1 & Re:		4.	Lea	se	II- 44 ARTICIANS.	
	ownship 18-S	Range	······································	Chalk Bluff Draw		
	18 <b></b> \$	27 <b>-</b> E		Eddy		
Pool Empire Abo				i of Lease (State, Fed Fee Federal		
If well produces oil or conden- give location of tanks		Н	17	Township Range 18-S 27-E		
Authorized transporter of oil [] yr cond	ensate	Addres	s (give address)	s to which approved copy of	this form is to be sent)	
Service Pipe Lir	le Company		Box 3	37, Midland, <sup>T</sup> exa	as	
	Is Gas Actually C			<b>A</b>		
Authorized transporter of casing head gas	or dry gas Date necto		s (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 dis	sposition:			· · · · · · · · · · · · · · · · · · ·	
flared at presen	t					
	REASON(S) FOR	FILING (pleas	e check prope	r box)	·····	
New Well Change in Ownership						
-	porter (check one)		(explain below	)		
	gas. Condensate.					
		L .				
Remarks						
The undersigned certifies that the Ru	les and Regulations of th	ne Oil Conserva	ion Commissi	on have been complied v	with.	
Executed th	s the <u>19th</u> day of _		,	<sup>19</sup> —61		
OIL CONSERVATIO	N COMMISSION	By				
Approved by	4			innha	- shy	
	1strong	Title	Agent			
Title VIL XXI GAS INSPECTA	7	Hu	umble 011	& Refining Compa	any	
Date MAY 3 1 1961		Addre	s S	lobbs, N.M.		