NEW AEXICO OIL CONSERVATION COMMISSION MAR 1 3 1962 (Form C-104) Santa Fe, New Mexico Revised 7/1/57 Santa Fe, New Mexico REQUEST FOR (OIL) - (GAS) ALLOWABEESIA, DIFICE 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-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. Artesia, N. M. 2/13/62 (Date) WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: R. C. Silverthorna Lanning, Well No. 2, in NE 1/4 3E 1/4, (Company or Operator) (Lease) I., Sec. 25., T. 18 S., R. 30 E., NMPM., Shngart. Pool Eddy. County. Date Spudded. 2/4/62. Date Drilling Completed 2/22/62 ______Total Depth______PBTD_____ Elevation_____ Please indicate location: Top Oil/Gas Pay_____2513_____Name of Prod. Form.____Yates D C В A PRODUCING INTERVAL -2513 - 2523 Perforations Depth F Ħ Depth E G Casing Shoe 2547 Tubing 2450 Open Hole OIL WELL TEST -Choke L K J d Choke Natural Prod. Test: 1/2 bbls.oil, _____bbls water in 24 hrs, ____min. Size____ Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of M N P Ö load oil used): <u>1.2</u> bbls.oil, _____bbls water in <u>21.</u> hrs, ____min. Size <u>1/2</u> GAS WELL TEST -1650/S 990/E Natural Prod. Test:______MCF/Day; Hours flowed _____Choke Size_____ Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):_____ Size Feet SAX Test After Acid or Fracture Treatment:______MCF/Day; Hours flowed Choke Size Method of Testing: 8 5/8 50 300 Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 2547 100 5 1/2 sand): 30,000 gals. oil 40,000# sd. Casing 225 Tubing Date first new Press. 100 oil run to tanks 3/8/62 2450 2 TNMPL Oil Transporter Gas Transporter_ emarks: _____ I hereby certify that the information given above is true and complete to the best of my knowledge. (Company or Operator) By: Q. D. Fujman (Signature) OIL CONSERVATION COMMISSION anustrong Title gent Send Communications regarding well to:

1503 Washington Artesia, N. M. Address.

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