

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

RECEIVED
New Well
Recompletion
SEP 15 1961

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 QUADRUPPLICATE 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. 9/1/61
(Place) (Date)

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

R. Q. Silverthorne *Leasing*, Well No. 1, in. SE 1/4 SE 1/4,
(Company or Operator) (Lease)
P, Sec. 25, T. 18 S, R. 30 E, NMPM, Culwin Yates 2nd Pool
Unit Letter
Eddy

County. Date Spudded 8/10/61 Date Drilling Completed 8/27/61

Please indicate location:

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

Elevation _____ Total Depth 2564 PBD
Top Oil/Gas Pay 2529 Name of Prod. Form. Yates

PRODUCING INTERVAL -

Perforations 2529-39, 2545-48
Open Hole _____ Depth _____ Casing Shoe 2564 Tubing 2500

OIL WELL TEST -

Natural Prod. Test: 2 bbls. oil, _____ bbls water in 24 hrs, _____ min. Choke Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 50 bbls. oil, _____ bbls water in 24 hrs, _____ min. Choke Size 3/8

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	790	50
5 1/2	2564	100
2 "	2500	

Method of Testing (pitot, back pressure, etc.): _____
Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____
Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 54,600 gals oil 114,000 # sd.
Casing _____ Tubing _____ Date first new _____
Press. 350 Press. 120 oil run to tanks 9/1/61

Oil Transporter We Wood Corp.
Gas Transporter _____

Remarks: This information to be kept confidential for 90 days.

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

Approved: SEP 15 1961, 19____

R. Q. Silverthorne
(Company or Operator)

OIL CONSERVATION COMMISSION

By: W.A. Gressett
Title: OIL AND GAS INSPECTOR

By: A. D. Fryman
(Signature)

Title: Agent-Consultant
Send Communications regarding well to:

Name: A. D. Fryman

Address: 1503 Wash n ton Artesia, N. M.

