

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

Tulsa, Oklahoma

November 15, 1961

(Place)

(Date)

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

Reading and Bates, Inc. Featherstone Federal, Well No. 1, in SW 1/4 SE 1/4,
(Company or Operator) (Lease)
0, Sec. 27, T. 18S, R. 30E, NMPM., North Benson Queen Under Pool

Unit Letter

Eddy

Please indicate location:

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

County. Date Spudded Oct. 19, 1961 Date Drilling Completed Oct. 28, 1961
Elevation 3441 Gr. 3453 KB Total Depth 3189 Gr. 3201 K.B. 3177 Gr.

Top Oil/Gas Pay 2810 Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 2810-12, 2814-16, 3011-14

Open Hole Depth Casing Shoe 3184 Depth Tubing 2700

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 100 bbls. oil, 0 bbls water in 24 hrs min. Size Choke pumped

GAS WELL TEST -

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

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): 400 gals. acid-39, 858 gals. lease crude, 46000# sand

Casing Tubing Date first new Press. 300 Press. - oil run to tanks Nov. 12, 1961

Oil Transporter Permian Corporation

Gas Transporter

Remarks: Perforated and fracture treated in both Penrose and U. Queen

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

Approved November 15, 1961

Reading and Bates, Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By I. J. Pierce

(Signature)

Title Vice President, Exploration

Send Communications regarding well to:

Name Reading and Bates, Inc.

Address Tulsa 3, Oklahoma-1101 Philtower Bldg.

By M. L. Armstrong

Title OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION		
ARCESIA DISTRICT OFFICE		
No. of copies received		
DISTRIBUTION		
	NO. FURNISHED	
OPERATOR		
SANTA FE		
PRODUCTION OFFICE		
STATE LAND OFFICE		
U. S. G. S.		
TRANSPORTER		
FILE		
BUREAU OF MINES		

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

FORM C-110
(Rev. 7-60)

NUMBER OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE	1	
FILE	1	
U.S.G.S		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
PRODUCTION OFFICE		
OPERATOR		2

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Reading and Bates, Inc.				Lease Featherstone Federal		Well No. 1	
Unit Letter 0	Section 27	Township 18 S	Range 30 E	County Eddy			
Pool North Benson Queen				Kind of Lease (State, Fed, Fee) Federal			
If well produces oil or condensate give location of tanks			Unit Letter 0	Section 27	Township 18 S	Range 30 E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Permian Corporation				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (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 disposition:

Now being flared - No pipeline connection available in area.

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below) _____
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

RECEIVED

NOV 17 1961

O. C. C.
ARTHEM, OFFICE

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 15th day of November, 19 61.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

I. J. Pierce

Title

Vice President, Exploration

Company

Reading and Bates, Inc.

Address **1101 Philtower Building
Tulsa 3, Oklahoma**

OIL AND GAS INSPECTOR

NOV 17 1961

OIL CONSERVATION COMMISSION	
ARIZONA DISTRICT OFFICE	
NAT. OIL & GAS BOARD	
DISTRIBUTION	
DATE	RECEIVED
OPERATOR	
SANTA FE	
PRODUCTION OFFICE	
DATE	
1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/> 9. <input type="checkbox"/> 10. <input type="checkbox"/> 11. <input type="checkbox"/> 12. <input type="checkbox"/>	