

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 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.

Hobbs, New Mexico October 17, 1960
(Place) (Date)

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

Skelly Oil Company Lea "D", Well No. 3, in SE 1/4 NE 1/4,
(Company or Operator) (Lease)

Unit Letter "H" Sec. 26, T. 17-S, R. 31-E, NMPM, Grayburg Jackson Pool

Eddy

County. Date Spudded Sept. 1, 1960 Date Drilling Completed Oct. 7, 1960

Please indicate location:

Elevation 3845' BP Total Depth 4000' PBTD 3870'

Top Oil/Gas Pay 3743' Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 3744-3750', 3784-3788' & 3800-3810'

Open Hole --- Depth --- Casing Shoe 3922' Depth Tubing 3643'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 299 bbls. oil, 0 bbls water in 17 hrs, 0 min. Choke Size 3/4"

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):

Fractured w/ 1432 bbls. lsc. oil & 52,000# sand by Dowell, Inc.

Casing --- Tubing --- Date first new ---
Press. --- Press. 90# oil run to tanks October 14, 1960

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter None

Remarks:

Well flowed 299 bbls. of oil in 17 hrs. through 3/4" choke, T.P. 90#.

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

Approved OCT 19 1960, 19

Skelly Oil Company

(Company or Operator)

By: [Signature]

(Signature)

Title Dist. Supt.

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 36 - Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title OIL AND GAS INSPECTOR

OIL FIELD COMMISSION	
ARTESIA DISTRICT OFFICE	
No. Cases Received	4
DISPOSITION	
OPERATOR	
SANTA FE	
PROBATION OFFICE	
STATE LAND OFFICE	
U. S. G. S.	
TRANSPORTER	
FILE	
BUREAU OF MINES	

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

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED 10
(Rev. 7-60)
OCT 19 1960

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Skelly Oil Company				Lease Lea "D"		ARTESIA, OFFICE Well No. 3	
Unit Letter "H"	Section 26	Township 17-S	Range 31-E	County Eddy			
Pool Grayburg Jackson				Kind of Lease (State, Fed, Fee) Federal			
If well produces oil or condensate give location of tanks		Unit Letter "G"	Section 26	Township 17-S	Range 31-E		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> J. N. M.				Address (give address to which approved copy of this form is to be sent) Box 38 - Hobbs, N.M.			
Is Gas Actually Connected? Yes <input type="checkbox"/> 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:

Waiting on gas connection - Gas being vented

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 ☐

Remarks

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

Executed this the **17th** day of **October**, 19 **60**

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

OIL AND GAS INSPECTOR

OCT 19 1960

Dist. Supt.

Skelly Oil Company

Box 38 - Hobbs, New Mexico

OIL CONSERVATION COMMISSION
ARTESIA DISTRICT OFFICE

No. Copies Received 4

DISTRICT OFFICE

COMMUNITY

SANTEE PE

EDUCATION CENTER

STATE

U. S. O. S.

TRANSPORTER

FILE

BUREAU OF MINES