NEV EXICO OIL CONSERVATION CORT SIGNIVE D Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (ELE) ALLOW ABLESO 800

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 taited at the Completion. 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

					liel	obs, New Me: (Place)	xiseSep	tember -30),1960 (Date)
•			?	NG AN ALLOWABLE FOR A WELL KNOWN AS: Lynch #B#, Well No					
Unit	CM Lotter	, Sec	27	, T 17-8 , 1	R 31E , N	MPM., . Gray i	burgJack	lon	Pool
Xdd	b r		- > ^ = 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	County. Date S	pudded Anly.	311960 P	ate Drilling Con	pleted Sen	tember 8.19
	Please inc			Elevation 35	241 DF	Total Dept	h	PBTD	
D	С	В	Λ	Top Oil/Gas Pay_ PRODUCING INTERV	3816! 'AL -	Name of Pr	rod. Form.	n Andres	
E	F	G	н	Perforations	- .	Depth		Depth	
				Open Hole 361 OIL WELL TEST -	2 - 39451	Casing Sho	· 3#12!	Tubing	360.21
L	K	J	I		st:bbl	•			
M	Noot	1on 27	P		or Fracture Trea			•	Choke
				GAS WELL TEST -					
1980	JHL A	1980 1	13.	- Natural Prod. Te	st:	MCF/Day; H	lours flowed	Choke Si	ze
Tubing	,Casing a	and Cemen	ting Recor	Method of Testin	ng (pitot, back p	ressure, etc.):_			·
Size	A - A	Fret	Sax	Test After Acid	or Fracture Trea	tment:	MCF/L	ay; Hours fl	lowed
8-5/		##01	125	Choke Size	Method of Te	sting:			
				Acid or Fracture	Treatment (Give	amounts of mate	rials used, such	as acid, wa	ter, oil, and
5-1/		8121	375	sand): 1279 bb	1110100	Date first new			7
27		1121 1466	ran	-1	Press.		_	•	
		• •		Gas Transporter_		•			· · · · · · · · · · · · · · · · · · ·
Remarks				ods iransporter_					
	-			6-bbls. oil a	•	water in 24	hours		
I h	ereby cei	rtify tha	t the info	rmation given abo	ve is true and c	omplete to the l	best of my know	ledge.	
Approve		OCT 3	1960	-		skelly Oil	Company	•••••	
••	V I	ONSERV	VATION	COMMISSION	Bv:	9-	(Company or Op	erator)	- f
`	211 4	9/V.		7	- , ·	(/	(Signature)		, , , , , , , , , , , , , , , , , , ,
By:		1121	ulst	rong	Titl	C	nmunications re	garding well	to:
Title	\	14.45 <u>5</u> .	G-S-HEBP	SC-FA-	Nan	ne Skally	Oil Company	r	
		•				. Dam 94	Habba W	er Memise	1

		OIL CONSERVATION COMMISSION ARTESIA DISTRICT OFFICE		
		No Copies Received		
		DETRIBUTION		
•	•	(10. 5 to		
		OPERATOR		
		SANTA FE		
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NEW MEXICO CIL CONSERVATION COMMISSION Form 6-110

SAN' A FE, NEW MEXICO C. C. ORespect 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION 2 27
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator	Shally Oil Compan	T	Lease 1	meh #B#
Well No. Un	it Letter 6 S 27	T_178_R_311	Pool Grayburg	sekson
County Bidy				·
If well produces oil or	Condengate sine to	ase (State, re	a. or Patented)	<u> Pederal</u>
Authorized Transports	CON C	ocation of tank	s:Unit y S 22	T178R311
Authorized Transporte	r of Oil or Condens	ate Texas-Nov	Mexico Pipe Lin	e Company
Addresa		Ben 3.67.0	MARIE Manuel	
(Give addr	ess to which appro-	ed copy of this	s form is to be s	ent)
Authorized Transporter	r of Gas			
Address			Data Carrie	
Address (Give address to not being sold	ess to which approve give reasons and seminations - Gas		e brescie grobos	ent) ition:
Reasons for Filing: (Ple	ase check proper b	ox) New W	ell	(02)
Change in Transporter Change in Ownership	r.		·	
Remarks:			Give explanation	n below)
	•			
The undersigned certific mission have been comp	es that the Rules at lied with.	d Regulations	of the Oil Conse	rvation Com-
Executed this the 30	day of September	19_60	0 1	
Approved8GT 3	1960	By	Mat. Sunt.	mlove
OIL CONSERVATION	ON COMMISSION	Compan	y Shally Cil Com	pany
34 11/2 (147015)	lrong.	Address	Box 38 - Hebbs	Herr Merries
Fitle OIL AND GAS INSPI	CTOA			

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RANSPORTER			
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