

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.

Hobbs, New Mexico August 29, 1957
(Place) (Date)

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

Sinclair Oil & Gas Company Turner "B"-SP, Well No. 44, in NE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)
Q1, Sec. 29, T. 17, R. 31, NMPM., Premier Pool
Unit Letter

Eddy County. Date Spudded 7-14-57 Date Drilling Completed 8-26-57

Please indicate location:

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

Elevation 3475 Total Depth 3431 PBD 3411

Top Oil/Gas Pay 2797 Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 3214 - 3224

Open Hole _____ Depth _____ Casing Shoe 3431 Depth _____ Tubing 3163

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 Choke load oil used): 1492 bbls. oil, _____ bbls water in 20 hrs, _____ min. Size 14/64"

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9 5/8</u>	<u>500</u>	<u>250</u>
<u>7"</u>	<u>3431</u>	<u>200</u>
<u>2"</u>	<u>3163</u>	

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

~~Fracture~~ or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and

sand): 15,000 gal. lease grade and 15,000# sand

Casing _____ Tubing _____ Date first new

Press. 5504 Press. 3504 oil run to tanks 8-26-57

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter _____

Remarks: _____

CORRECTED REPORT: (List date first new oil run to tanks)

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

Approved SEP 20 1957, 19____

Sinclair Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: G. G. Salter
(Signature)

By: M. L. Armstrong

Title District Supt.

Send Communications regarding well to:

Title OIL AND GAS INSPECTOR

Name G. G. Salter

Orig. & Rec: OGC
cc: FIB, MVD, File

Address Hobbs, New Mexico

OIL CONSERVATION COMMISSION
ARTERIA DISTRICT OF
COPPER BELT

NAME	
ADDRESS	
CITY	
STATE	
ZIP	
PHONE	
DATE	
SIGNATURE	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form O-110
Revised 7/1/55
D

(File the original and 4 copies with the appropriate district office) SEP 16 1957

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Cons. Comm.
ARTESIA OFFICE

Company or Operator Sinclair Oil & Gas Company Lease Turner-B SP

Well No. 48 Unit Letter G S 29 T 17 R 31 Pool Premier

County Eddy Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit S T R

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipe Line Company

Address Box 1410, Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

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:

No Flare

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other No Gas Connection ()

Remarks: _____
(Give explanation below)

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

Executed this the 13 day of September 19 57

By Bob Smith

Approved SEP 20 1957 19 _____

OIL CONSERVATION COMMISSION
By M L Armstrong Title District Supt.

Company Sinclair Oil & Gas Company
Address Hobbs, New Mexico

Title OIL AND GAS INSPECTOR

Orig. & 4cc:GCC cc:FNE, NFD, File

INVESTIGATION COMMISSION
DISTRICT OFFICE
Date _____
Page _____

1. Name of the person investigated	
2. Position of the person investigated	
3. Date of investigation	
4. Location of investigation	
5. Name of the investigator	
6. Signature of the investigator	
7. Date of signature	