

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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

ARTESIA, NEW MEXICO 12/1/58

(Place)

(Date)

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

W. C. WELCH

FEATHERSTONE

NW

NW

, Well No. _____, in _____ 1/4 _____ 1/4,

(Company or Operator)

(Lease)

D ✓, Sec 22

T. 19S

R. 28E

UNDESIGNATED ✓

Pool

EDDY

8/21/58

II/25/58

County. Date Spudded

Date Production Completed

1879

1800

Please indicate location:

Elevation 1773 Total Depth PBDT

Top Oil/Gas Pay Name of Prod. Form.

PRODUCING INTERVAL -

Perforations 1773 TO 1785 WITH 48 SHOTS

Open Hole - Depth 1879 Depth 1800
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: 3 bbls. oil, - bbls water in 24 hrs, - min. Choke NONE

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 NONE

GAS WELL TEST -

Natural Prod. Test: 8 MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Size
8 5/8	1310	75
7	1879	50

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):

(SEE BELOW)
Casing 30 Tubing - Date first new NOVEMBER 30, 1958
Press. oil run to tanks

Oil Transporter MALCO REFINERIES, INC.

Gas Transporter

Remarks: 11/28/58 - SANDPRAC WITH 5000 GALLONS OF LEASE OIL.

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title _____

W. C. WELCH

(Company or Operator)

By: W. C. Welch

(Signature)

OWNER

Title _____

Send Communications regarding well to:

Name W. C. WELCH

Address BOX 401

ARTESIA, NEW MEXICO.

INTERNATIONAL COMMISSION
ON THE HISTORY OF LINGUISTICS
AND LANGUAGE SCIENCE

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

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator W. C. WELCH Lease FEATHERSTONE-206

Well No. I Unit Letter D S 22 T 19S R 28E Pool UNDESIGNATED

County EDDY Kind of Lease (State, Fed. or Patented) FEDERAL

If well produces oil or condensate, give location of tanks: Unit D S 22 T 19S R 28E

Authorized Transporter of Oil or Condensate MALCO REFINERIES, INC.,
ROSWELL, NEW MEXICO.

Address _____
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas NO MARKET FOR 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:

VENTED

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

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

Change in Ownership _____ () Other _____ ()

Remarks: _____ (Give explanation below)

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

Executed this the 1ST day of DECEMBER 19 58

By W. C. Welch

Approved _____ 19 _____

Title OWNER

OIL CONSERVATION COMMISSION

Company W. C. WELCH

By M L Armstrong

Address Box 401
ARTESIA, NEW MEXICO.

Title _____

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