NEW _____XICO OIL CONSERVATION COMM___ION R E C E I V C D Santa Fe. New Mexico Revised 7/1/57 REQUEST FOR (OIL) - (GAS) ALLOWABLENOV 2 1 16 New Well Recompletion This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil pre Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form CTUT 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. MIDLAND. TEXA HOVENBER 14, 1960 (Place) (Date) WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: CENTREMS & NEWERDY erne state, Well No... (Company or Operator) (Lease) 31 E, NMPM., **T**.... Pool Unit Lo 8/12/59 9/22/59 REET Date Drilling Completed County. Date Spudded...... 3498 3564 3500 Total Depth Elevation Please indicate location: YATES SAID 2625' Name of Prod. Form. Top Oil/Gas Pay D C В A PRODUCING INTERVAL -X 2632 to 2640 Perforations E F G H Depth Depth 3500 2598 Open Hole Casing Shoe Tubina OIL WELL TEST -K L J Ι Choke **9** bbls.oil, _____bbls water in ____hrs, ___min. Size Natural Prod. Test: Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of P M Ň 0 load oil used): 56 bbls.oil, 9 bbls water in 24 hrs, min. Size GAS WELL TEST -660 FHL & ML _____MCF/Day; Hours flowed _____Choke Size Natural Prod. Test: tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.): Size Feet Sax MCF/Day; Hours flowed Test After Acid or Fracture Treatment: Choke Size Method of Testing: 50 8 5/8 805 Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 5 1/2 3500 240 refined oil 4 60,000 # sand): 20,000 gal. sand Date first ne Casing Tubing 11/11/60 510 25 Proce. oil run to tanks Press. Petroleum Company Cactus Oil Transporter Philling Petroleum Company Gas Transporter is flowing on an re i Remarks:... intermitter with 15 minute cycles each bour. I hereby certify that the information given above is true and complete to the best of my knowledge. CHANNELS & XENDEDY NOV 21 1960 Approved..... (Company or Operator) Lauri OIL CONSERVATION COMMISSION (Signature) Title. Send Communications regarding well to: OIL AND GAS INSPEL Title Address... 67 HTDLAND HB-

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| SANTA FE, NEW MEXICO RECTORING |
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| (File the original and 4 copies with the appropriate district office) NOV $2.1.1967$ |
| CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS |
| Company or Operator CHANDERS & KENNEDY Lease HANTERSY STATE |
| Well No. 2 Unit Letter D S 32 T 105 R 31E Pool |
| County BDDY Kind of Lease (State, Fed. or Patented) |
| If well produces oil or condensate, give location of tanks: Unit K S 32 T 188 R 31E |
| Authorized Transporter of Oil or Condensate CACTUS PETROLEUM XHC. |
| Address P. C. BOX 634 MIPLAND, TEXAS (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas MILLIPS PETABLEMI COMPANY |
| Address P. O. BOX 791 MIDLAND, TAXAS Date Connected IDMEDIATLY |
| (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: |
| |
| Reasons for Filing:(Please check proper box) New Well (3) |
| Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate () |
| Change in Ownership () Other () Remarks: (Give explanation below) |

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

| Executed this the day | of | 19 |
|-----------------------------|------|------------------------------------|
| NOV 21 19 | 6019 | By_ (D. J. Chefander Title |
| OIL CONSERVATION COMMISSION | | Company CRAMERIA & FRANCEDY |
| By ML Armistrong | | Address 607 MIDLAND MAR"L BANK MLP |
| Title an nen gas inspectes | | |

