

**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 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.

Artesia, New Mexico      October 14, 1963  
(Place)      (Date)

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

Kersey & Company      Bass ✓      Well No. 1 ✓      in NE 1/4 SE 1/4  
(Company or Operator)      (Lease)  
12-      19S-      28E-      East Millman Q. H. Pool  
Unit Letter      Sec.      T.      R.      NMPM.

Eddy

Aug. 11, 1963

Date Drilling Completed

Sept. 15, 1963

Please indicate location:

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

1050/S      990/E

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
3 5/8	401	50
4 1/2	2270	100
2 3/8	2162	

Elevation      Total Depth      PBD  
2157      2318      2280

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

**PRODUCING INTERVAL -**

Perforations      1 hole 2157' - 4 holes 2166-74 - 4 holes 2230-34'

Open Hole      Depth      Depth      2162'  
Casing Shoe      2272      Tubing      perforation 2131

**OIL WELL TEST -**

Natural Prod. Test:      4 gallons of oil/hour      Choke  
bbls. oil,      bbls water in      hrs,      min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used):      123      bbls oil,      54      bbls water in      22      hrs,      0      min. Choke Size      6/64

**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):      687 bbls. lease oil, 250004 20-40 sand

Casing      460      Tubing      Date first new      October 10, 1963  
Press.      Press.      oil run to tanks

Oil Transporter      Continental Pipe Line Company

Gas Transporter      Phillips Petroleum Company

Remarks:

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

Approved:      19

OCT 15 1963

OIL CONSERVATION COMMISSION

By:      W. A. Gressett

Title      DIST. MGR. NEW MEXICO

Kersey & Company  
(Company or Operator)

By:      Harold Kersey  
(Signature)

Title      Owner

Send Communications regarding well to:

Name      Kersey & Company

Address      P. O. Box 316, Artesia, New Mexico

**RECEIVED**

OCT 15 1963

O. C. C.  
ARTESIA, OFFICE

NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b>		<b>FORM C-110</b> (Rev. 7-60)
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE				
Company or Operator <b>Kersey &amp; Company</b>			Lease <b>Bass</b>	Well No. <b>1</b>
Unit Letter <b>I</b>	Section <b>12</b>	Township <b>19S</b>	Range <b>28E</b>	County <b>Eddy</b>
Pool <b>East Millman Q-2H</b>			Kind of Lease (State, Fed, Fee) <b>State</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>I</b>	Section <b>12</b>	Township <b>19S</b>
		Range <b>28E</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Continental Pipe Line Company</b>			Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 367, Artesia, New Mexico</b>	
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Phillips Petroleum Company</b>		Date Connected	Address (give address to which approved copy of this form is to be sent) <b>Buxton Midland, Texas</b>	
If gas is not being sold, give reasons and also explain its present disposition:				
REASON(S) FOR FILING (please check proper box)				
New Well ..... <input checked="" type="checkbox"/> Change in Ownership ..... <input type="checkbox"/> Change in Transporter (check one) Other (explain below) Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/> Casing head gas ..... <input type="checkbox"/> Condensate ..... <input type="checkbox"/>				
Remarks <b>To name the oil &amp; gas transporters of new well.</b>				
<b>RECEIVED</b> <b>OCT 15 1963</b> <b>O. C. C.</b> <b>ARTESIA, OFFICE</b>				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.				
Executed this the <b>14</b> day of <b>October</b> , 19 <b>63</b> .				
OIL CONSERVATION COMMISSION		By <b>Harold Kersey</b>		
Approved by <b>W. A. Gressett</b>		Title <b>Owner</b>		
Title <b>OIL AND GAS INSPECTOR</b>		Company <b>Kersey &amp; Company</b>		
Date <b>OCT 15 1963</b>		Address <b>P. O. Box 316, Artesia, New Mexico</b>		