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NEV MEXICO OIL CONSERVATION COM. SSION

Santa Fe, New Mexico

MAR 2 3 1960 Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE C. C. 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

						Hobbs, N	er Mexico	March 22,	1960
						(Place)			(Date)
		Y REQ	UESTI	NG AN ALLO	OWABLE FO	R A WELL KN	OWN AS:		—
. CLEN		- O	<i>F</i> (4)	COMP.		, Well No	<u>1</u> , in	39	1/4
	•	or Operate	PF)		(Lease)				
Unit I	etter.	, Sec a.a.	••••••	., 1	, R <i>#.!</i>	, NMPM.,	Wildost	•••••••••••	Poc
		••••		County. Da	ate Spudded	2/19/60	Date Drilling	Completed 3/1	6/60
		ate locat		Elevation	30891	Total	Depth 2367	PBTD	1000
							of Prod. Form.	elausre	
P	C	В	A	PRODUCING IN			~~~		
		l				w/i teps		•	
E	F	G.	H		2349-52	Donth		Depth	
				Open Hole		Casing	g Shoe	Tubing	8349*
				OIL WELL TES	<u> </u>				
r	K	J	I		_	bble oil	bbls water i		Choke
		ŀ							
M	N	0	P				r recovery of volu		O1-
x				load oil use	ed):bb	ls,oil, 19	_bbls water in 1	2 _hrs,	min. Size
				GAS WELL TES	<u>1</u> -				
6601	fr 8	F M		Natural Prod	i. Test:	MCF/Da	ny; Hours flowed _	Chake S	i 70
ubing ,Ca	sing and	Cementin	g Recor	_			;,);		
Size	Fee	rt	Sax						
		.	- , , , , , , , , , , , , , , , , , , ,				MC		l owed
10-3/4	369		•	Choke Size	Method	of Testing:		~ i	:
	حمده ا	. .		Acid or Frac	ture Treatment	(Give amounts of	materials used, su	ich as acid, wa	ter, oil, and
4-1/2	2367	<u>* </u>	75 ex	sand):	000 gal ls	oil 1/6FG 20	/10	·	
2-3/8	91	491					new tanks 3/16/6	<u> </u>	
-3/4	-	-		1					
	-			Cil Transpor	ter	ctus Pet. Co			
				Gas Transpor	ter	NG	(1) (i) (ii) (ii) (ii) (ii) (ii) (ii) (i		
marks:		* #			100 au 4 0	100 -211 L-			***************************************
Slecti	Je Tol	g actes	nea/	leepy) C	-120 and v	-105 will be	ILLOG	***************************************	
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I here	by certif	y that th	e infor	mation given	above is true	and complete to	the best of my kno	owledge.	
			_	2.3.1960			BEMETT	,	
F		• • • • • • • • • • • • • • • • • • • •	···	··₩··⊍···I⊍\₩····	, 1.5	· ····································	(Company or C	Operator)	
O.	IL CON	ISER VA	TION (COMMISSIO	N.	Rv. S/22	Thorp		
5	1 D				- 4	-1	Signatu	re)	
. ///	ILL	me	Mri	ong		Title Produ	etion Supt.		
		***************************************	•••••••	7	*************		Communications	regarding well	to:
le			IID.6A.	SINSPECTOR		_		-	
				U		Name C/O	il Reports B	DE 703 HOD	

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