

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
(Revised 7/1/52)

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Inhback, Texas September 16, 1952  
(Place) (Date)

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

DeKalb Agric. Assn., Inc. L.C. Fouch, et al Well No. 1-13, in NE SE 1/4 SE 1/4,  
(Company or Operator) (Lease)

P, Sec. 13, T. 24-S, R. 23-E, NMPM, Valera Exp. Pool  
(Unit)

Bray County. Date Spudded August 21, 1952, Date Completed September 11, 1952

Please indicate location:


Elevation 2540.2 Total Depth 2739, P.B. -2-

Top oil/gas pay 2731 Top of Prod. Form. Delayed Sand, 2731'

Casing Perforations: None or

Depth to Casing shoe of Prod. String 2694'

Natural Prod. Test Failed 20 Barrels, approximately BOPD

based on 10 bbls. Oil in 12 Hrs. -2- Mins.

Test after acid or shot 33 after Hydracne + 17 Bbl BOPD

Based on 33 bbls. Oil in 24 Hrs. 5 Mins.

Gas Well Potential Not

Size choke in inches 1"

Date first oil run to tanks or gas to Transmission system: September 15, 1952

Transporter taking Oil or Gas: Western Oil Transport Company

Casing and Cementing Record

Size Feet Sax

3 5/8	324	150
5 1/2	2,694	75

Remarks: New Well

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

Approved SEP 18 1952, 19 DeKalb Agricultural Association, Inc.  
(Company or Operator)

OIL CONSERVATION COMMISSION

By: K. G. [Signature]

Title OIL AND GAS INSPECTOR

By: [Signature]  
(Signature)

Title Production Supt.

Send Communications regarding well to:

Name DeKalb Agric. Assn., Inc.

Address 606 Inhback Natl. Bldg.