

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~(GAS)~~ - (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.

Midland, Texas

November 2, 1960

(Place)

(Date)

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

Honolulu Oil Corporation

Jicarilla "A"

Well No. 2, in SE $\frac{1}{4}$ SE $\frac{1}{4}$,

(Company or Operator)

(Lease)

P, Sec. 25, T. 26N, R. 3W, NMPM, Pine Lake (Pictured Cliff) Pool

Unit Letter

Rio Arriba

County. Date Spudded July 16, 1960 Date Drilling Completed July 26, 1960

Please indicate location:

Elevation 7557 BDF Total Depth 4110 PBD 4070

Top Oil/Gas Pay 3976 Name of Prod. Form. Pictured Cliff

PRODUCING INTERVAL -

Perforations 3976-92, 4014-28

Open Hole None Depth 4108 Casing Shoe 4021 Depth 4021 Tubing

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

Natural Prod. Test: None MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 1115 MCF/Day; Hours flowed 24

Choke Size 1-1/4 Method of Testing: Multipoint back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000 gallons water - 40,000 pounds sand

Casing 1,500 Tubing _____ Date first new _____ Press. 1,500 Press. - oil run to tanks None

Oil Transporter None

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8-5/8</u>	<u>228</u>	<u>125</u>
<u>5-1/2</u>	<u>4108</u>	<u>300</u>
<u>1-1/4</u>	<u>4021</u>	<u>-</u>

Remarks: _____

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

Approved NOV 4 1960, 19____

Honolulu Oil Corporation

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

Title Division Drilling & Perforation Engineer

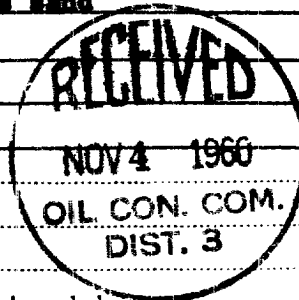
Send Communications regarding well to:

Name Honolulu Oil Corporation

Address P. O. Drawer 1391, Midland, Texas

By: _____

Title Supervisor Dist. # 3



100-100000

STATE OF NEW MEXICO	
OIL CONSERVATION COMMISSION	
AZUL DISTRICT OFFICE	
NUMBER OF COPIES RECEIVED <u>4</u>	
DATE <u>10/1/51</u>	
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