## NEW MEXICO OIL CONSERVATION COMMISSION

## APPLICATION FOR MULTIPLE COMPLETION

|   | MEW MEXICO OIL CO  | INSERVATION COMMISS  | ЮН               |                               |
|---|--|--|------------------|-------------------------------|
|   | SANTA F  | E, NEW MEXICO  |                  | 5,-1-61                       |
|   | APPLICATION FOR  | MULTIPLE COMPLETION  |                  | 100 407 5-1-61                |
| Operator  | and the second second second selection of the second second second second second second second second second s   | County   | Date             |                               |
| Tidewater Oil Company   |  | Lea  |                  |                               |
| Address   |  | Lease  | Well No          | •                             |
| Box 547, Hobbs, N   | Section  | A. B. Coates "C" Township  | 18               |                               |
| of Well L   | 24   | 25S  | Range            | 37E                           |
| 1. Has the New Mexico Oil Conse   | 1  | <u> </u>   | n of a well in   |                               |
| same zones within one mile of<br>t, It answer is yes, identify one so<br>1 present dual complete<br>servation Comm. Order | ed in Justis Blinebry  | ; Operator, Lease, a   | : Field u        |                               |
| . The following facts are submitted   |  | Intermediate<br>Zone   |                  | Lower<br>Zone                 |
| a. Name of Pool and Formation   | Justis Blinebry  | Justis Tubb-Dr   | inkard           | Justis Ellenburger            |
| b. Top and Bottom of  | 5040 - 5655  | 5658 - 5932  |                  | 7678 - 7800 T.D.              |
| Pay Section   | Ì  | ed o   |                  | . ,                           |
| (Perforations)  | (5274 to 5354)   | (5668 to 5890  | )                | (7758 to 7800) O.H.           |
| c. Type of production (Oil or G   | as) Oil  | Oil  |                  | Oi1                           |
| d. Method of Production   | Flow   | Flow   | ľ                | Flow                          |
| (Flowing or Artificial Lift<br>. The following are attached, (Pl  | OF THE PERSON ASSESSMENT OF THE PERSON NAMED ASSESSMENT OF THE PERSON OF |  |                  |                               |
| . List all offset operators to the Gulf Oil Corp., Box 2 Western Natural Gas C  | 167, Hobbs, N. Mex.<br>o., Box 1060, Jal, N.   | ed together with their correct ma                                    |                  |                               |
| Amerada Petr. Co., Dr   |  |  |                  |                               |
| Atlantic Refining Co.   | •  | N. Mex.  |                  |                               |
| Texaco, Inc., Box 728   |  |  | ·                |                               |
| W. K. Byrom, 517 N. T<br>Skelly Oil Company, B  |  |  |                  |                               |
| Union Texas Natural G   |  |  |                  |                               |
|   |  | ,  | ***************  |                               |
|   |  |  |                  |                               |
| . Were all operators listed in Item of such notificationApr   | 5 above notified and furnished a il 27, 1962   | copy of this application? YES  | X NO             | . If answer is yes, give date |
| CERTIFICATE: I, the undersig  | <del>-</del>   | ent  |                  |                               |
| nder my supervision and direction   | (company), and that I am authoriz<br>and that the facts stated therein   | ed by said company to make this<br>are true, correct and complete to | s report; and to | hat this report was prepared  |
|   |  |  |                  | *                             |
|   |  | C. L. Wade   | <u> </u>         | Aras Sunt                     |
| Should waivers from all offs<br>Commission will hold the a  | set operators not accompany an a<br>pplication for a period of twenty  | application for administrative app                                   | oroval, the Ne   | w Mexico Oll Conservation     |
|   |  | (10) days from date of fecelot by                                    |                  | ton a onnta re office. It.    |
|   | d, no procest nor request for hear   |  |                  |                               |

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