ARTESTA. NEW MEXICO.

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

DEC 1 5 1959 Revised 7/1/57

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

ARTESIA, NEW MEXICO DEC. 14, 1959 WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: W. C. WELCH FEATHERSTONE WELCHWell No. I in SW 1/4 NW 1/4. Company or Operator)

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NMPM, **EDDY** County. Date Spudded 7/28/59 Date Drilling Completed II/7/59PBTD 1730 Elevation -Please indicate location: III3 _Name of Prod. Form. SEVEN RIVERS Top Oil/Gas Pay_ C В PRODUCING INTERVAL -Perforations III3-III9; II27-II33 EA G H II00Open Hole OIL WELL TEST -K J I Natural Prod. Test: 5 bbls.oil, bbls water in 24 hrs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 65 bbls.oil, ___ bbls water in 24 hrs, __min. Choke GAS WELL TEST -٨/ Natural Prod. Test: MCF/Day; Hours flowed _____Choke Size____ Tubing Casing and Comenting Record Method of Testing (pitot, back pressure, etc.): Size Feet SAX Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size ____Method of Testing:__ 8-5/8 565 50 Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 90 I**2**65 sand): Tubing Date first new oil run to tanks DECEMBER 12. 1959 CACTUS PETROLEUM, INC. Oil Transporter BOX 634 - MIDLAND, TEXAS. Gas Transporter Remarks: ON DECEMBER 4, 1959 TREATER WITH 54,000# OF SAND, IIOO# ABONITE THROUGH ABOVE PERFORATIONS IN 7" CASING. and 600 bbls. of Lease Oil I hereby certify that the information given above is true and complete to the best of my knowledge. DEC 1 5 1959 (Company or Operator) OIL CONSERVATION COMMISSION Title....OWNER Send Communications regarding well to: Title SIL AND GAS INSPECTED W. C. WELCH Name BOX 401

Address....

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