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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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

Artesia, New Mexico **May 14, 1964**

(Place)

(Date)

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

Dr. Sam G. Dunn

England

Well No. **1 B**, in **NW** $\frac{1}{4}$ **NE** $\frac{1}{4}$,

(Company or Operator)
B Sec. **4**

T. **7 S**, R. **26 E**, NMPM., **Linda San Andres** Pool

Unit Letter

Chaves

County. Date Spudded **6-10-63** Date Drilling Completed **6-20-63**

Elevation **3735 GL** Total Depth **1124** PBD **1124**

Top Oil/Gas Pay **1064** Name of Prod. Form. **Slaughter San Andres**

PRODUCING INTERVAL -

Perforations **1064 to 1088**

Open Hole _____ Depth Casing Shoe **1124** Depth Tubing **1047**

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): **12** bbls. oil, **25** bbls. water in **24** hrs, _____ min. Size **None**

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: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **1000 gal. 15% acid water, 14000 gals. 3% acid & 7000 lbs. sand**

Casing Press **None** Tubing Press **None** Date first new oil run to tanks **May 1, 1964**

Oil Transporter **McWood Corporation**

Gas Transporter **None**

Remarks: _____

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

Approved: _____, 19_____

MAY 18 1964

OIL CONSERVATION COMMISSION

By: _____

Title **OIL AND GAS INSPECTOR**

Dr. Sam G. Dunn

(Company or Operator)

By: *Pat Thompson*

(Signature)

Agent

Title _____

Send Communications regarding well to:

Name **Dr. Sam G. Dunn**

1312 Main, Lubbock, Texas

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	GAS	
PRODUCTION OFFICE		2
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Dr. Sam G. Dunn				Lease England		Well No. 1 B	
Unit Letter B	Section 4	Township 7 South	Range 26 East		County Chaves		
Pool Linda San Andres					Kind of Lease (State, Fed, Fee) Federal		
If well produces oil or condensate give location of tanks			Unit Letter B	Section 4	Township 7 South	Range 26 East	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> McWood Corporation				Address (give address to which approved copy of this form is to be sent) P. O. Box 330, Abilene, Texas			
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/> _____							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

TSTM, vented

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below) _____
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 11th day of May, 19 64.

OIL CONSERVATION COMMISSION		By
Approved by	<i>[Signature]</i>	Title
		Agent
Title	Company	Dr. Sam G. Dunn
Date	Address	
MAY 18 1964	1312 Main, Lubbock, Texas	

GAS INSPECTED