

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

MAY 1 10 54 AM '64 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.

Hobbs, New Mexico

May 1, 1964

(Place)

(Date)

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

Felmont Oil Corporation **Felmont Hissom State** Well No. 1, in SE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)

F, Sec. 15, T. 11 S, R. 33 E, NMPM., Undesignated (N. Bagley Upper Pool
Unit Letter Re-completed 1/4 Penn)

Lea

County. Date Spudded 4/21/63

Date Drilling Completed 4/28/64

Please indicate location:

Elevation 4273 KB Total Depth 10,224 PBDT 10,080

Top Oil/Gas Pay 9601 Name of Prod. Form. Upper Penn

PRODUCING INTERVAL -

Perforations 9601-03; 9613-15 w/4 SPF

Open Hole Depth 10,224 Casing Shoe 9615 Depth 9615 Tubing

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 load oil used): 247.5 bbls. oil, 165 bbls water in 24 hrs, no min. Size 18/64 Choke

GAS WELL TEST -

Natural Prod. Test: _____ 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): 700 gallons acid

Casing Press. Pkr. Tubing Press. 200 Date first new oil run to tanks 4/29/64

Oil Transporter Service Pipe Line Company

Gas Transporter Warren Petroleum Corporation

Remarks: Re-completed from N. Bagley Lower Penn.

80 acres

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

Approved: _____, 19____

Felmont Oil Corporation

(Company or Operator)

By: A. L. Smith
(Signature)

OIL CONSERVATION COMMISSION

Title: Agent

Send Communications regarding well to:

Name: Felmont Oil Corporation

% OIL REPORTS & GAS SERVICES

Address: BOX 763, HOBBS, NEW MEXICO

By: _____
Title: _____