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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

RE-ENTRY
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

12/9/64

(Place)

(Date)

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

JOSEPH I. O'NEILL, JR.

(Company or Operator)

STATE "L", Well No. **1**, in **SW** $\frac{1}{4}$, **SW** $\frac{1}{4}$,
(Lease)

M, Sec. **16**, T - **8 - S**, R. **36 E**, NMPM, **UNDESIGNATED** Prod.
Unit Letter

ROOSEVELT

County. Date Spudded **MAY 15, 1961** Date Drilling Completed **JULY 3, 1961**

Please indicate location:

Elevation **4121' DF** Total Depth **9702'** PBD **5090'**

Top Oil/Gas Pay **4800'** Name of Prod. Form. **SAN ANDRES**

PRODUCING INTERVAL -

Perforations **4800, 4806, 4812, 4819, 4839, 4842, 4844, 4852, 4854**

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing **4736'**

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): **41** bbls. oil, **28** bbls water in **24** hrs, **0** min. Size **NONE**

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): _____

Casing **PACKER** Tubing **30** Date first new **DECEMBER 8, 1964**
Press. _____ Press. _____ oil run to tanks

Oil Transporter _____

Gas Transporter **NONE - FLARED**

Remarks: **ACIDIZED w/5000 GAL. UNISOL ACID**
GOR - TSTM

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

Approved _____, 19____

JOSEPH I. O'NEILL, JR.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *Roy L. Blanton*
(Signature)

Title **PRODUCTION CLERK**
Send Communications regarding well to:

Name **JOSEPH I. O'NEILL, JR.**

By: _____

Title _____