

**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 QUADRUPPLICATE 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.

Hebbs, New Mexico January 9, 1961  
(Place) (Date)

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

The Ohio Oil Company Milton Basham "B", Well No. 1, in NW  $\frac{1}{4}$  SW  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)  
L, Sec. 18, T. 8 S, R. 37 E, NMPM., Blunitt-Penn. Pool  
Unit Letter

Roosevelt

County. Date Spudded 11-8-60 Date Drilling Completed 12-27-60

Please indicate location:

D	C	B	A
E	F	G	H
L K	K	J	I
M	N	O	P

Elevation 4068' DF Total Depth 9600' PBD

Top Oil/Gas Pay 9572' Name of Prod. Form. Bough "C"

PRODUCING INTERVAL -

Perforations

Open Hole 9572-9600' Depth Casing Shoe 9572' Depth Tubing 9596'

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): 173 bbls. oil, None bbls water in 22 hrs, \_\_\_\_\_ min. Size 18/64

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>13 3/8</u>	<u>409</u>	<u>350</u>
<u>9 5/8</u>	<u>4220</u>	<u>1945 LW</u>
		<u>200 reg</u>
<u>7"</u>	<u>9572</u>	<u>200</u>

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): Acidized 9572-9600' with 15,000 gallons

Casing Tubing Date first new

Press. Plcr Press. 331 oil run to tanks 1-8-61

Oil Transporter McWood Corporation

Gas Transporter None

Remarks: Request top allowable of 167 BOPD.

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

Approved \_\_\_\_\_, 19\_\_\_\_

**THE OHIO OIL COMPANY**

(Company or Operator)

By: B. L. Walters Jr.

(Signature)

Title Superintendent

Send Communications regarding well to:

Name The Ohio Oil Company

Address Box 2107, Hebbs, New Mexico

**OIL CONSERVATION COMMISSION**

By: \_\_\_\_\_

Title \_\_\_\_\_

Dist:  
N.M.O.C.C.

Mr. J. A. Grimes  
Mr. L. H. Shearer  
Mr. D. V. Atley  
Mr. T. A. Steele  
Mr. C. M. Lynch  
Mr. T. O. Webb  
Mr. R. E. Feather