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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 **Jan. 5, 1962**
(Place) (Date)

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

S. P. Yates **LMY** Well No. **2** in **SE** $\frac{1}{4}$ **NW** $\frac{1}{4}$,
(Company or Operator) (Lease)
P Sec. **33** T. **8 S** R. **37 E**, NMPM, **Allison-Penn** Pool
Unit Letter

Roosevelt

Please indicate location:

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

County. Date Spudded **11-24-61** Date Drilling Completed **12-31-61**
Elevation **4034** Total Depth **9670 Ft.** PBD **9603 ft.**

Top Oil/Gas Pay **9562'** Name of Prod. Form. **Penn**

PRODUCING INTERVAL -

Perforations **9562' to 9567' & 9572' to 9577'**

Open Hole Depth Casing Shoe **9636'** Depth Tubing **9535'**

OIL WELL TEST -

Natural Prod. Test: **No test** Choke Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **167** bbls, oil, **nil** bbls water in **10** hrs, **12/64** min. Choke Size

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): **500 gal spearhead acid, 6000 gal. regular acid**

Casing Press. **PKR** Tubing Press. **1304** Date first new oil run to tanks **1-4-62**

Oil Transporter **Mobil Pipeline Company**

Gas Transporter **Hochberg & Ingram**

Remarks:

All measurement from KDB - height 12.6 feet

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

Approved **January 5**, 19 **62**

S. P. YATES

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

By: *[Signature]* (Signature)

Title **Agent**

Send Communications regarding well to:

Name **S. P. Yates**

Address **309 Carper Bldg., Artesia, N.M.**

Title _____