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NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

HOBBS OFFICE O. C. C.

New Well

~~603331033~~

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.

Hobbs, New Mexico

June 15, 1964

(Place)

(Date)

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

El Chorro Exploration, Inc. **Jacobs Federal**, Well No. **16**, in **SE** $\frac{1}{4}$ **SW** $\frac{1}{4}$,

(Company or Operator)

(Lease)

N, Sec. **19**, T. **8 S**, R. **35 E**, NMPM., **Milnesand-San Andres** Pool

Unit Letter

Roosevelt

County. Date Spudded **5/20/64** Date Drilling Completed **5/30/64**

Elevation **4240 KB** Total Depth **4730** PBD **4722**

Please indicate location:

Top Oil/Gas Pay **4646** Name of Prod. Form. **San Andres**

PRODUCING INTERVAL -

Perforations **4646-4686, 4702-4714**

Open Hole Depth **4730** Depth Casing Shoe **4691** Depth Tubing **4691**

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): **355** bbls. oil, **no** bbls. water in **24** hrs, **no** min. Size **Pump** 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): **See Remarks**

Casing Press. _____ Tubing Press. **150#** Date first new oil run to tanks **6/4/64**

Oil Transporter **Magnolia Pipe Line Company**

Gas Transporter **Sinclair Oil & Gas Company**

Remarks: **1,000 gal D8-30 acid, 20,000 gal lease oil, 500# adomite, 20,000# sand.**

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

El Chorro Exploration, Inc.

Approved: **1116**, 19____

(Company or Operator)

By: **H. L. Smith** (Signature)

OIL CONSERVATION COMMISSION

Title: **Agent**

Send Communications regarding well to:

Name: **El Chorro Exploration, Inc.**

% OIL REPORTS & GAS SERVICES

Address: **BOX 763 HOBBS, NEW MEXICO**

By: _____

Title: _____