

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New MexicoREQUEST FOR (OIL) - (GAS) ALLOWABLE OFFICE OCC 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico March 15, 1955

(Place)

(Date)

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

GEORGE H. WILLIAMS **Gulf-State**, Well No. **1**, in **NE** $\frac{1}{4}$ **NW** $\frac{1}{4}$,
(Company or Operator) (Lease)
C, Sec. **14**, T. **13S**, R. **31E**, NMPM, **Caprock** Pool
(Unit)
Chaves County. Date Spudded **2/23/55**, Date Completed **3/15/55**

Please indicate location:

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Elevation **4420'** Total Depth **3053'** P.B.Top oil/gas pay **3028** Name of Prod. Form **Queen Sand**Casing Perforations: **3028' - 3041'** or

Depth to Casing shoe of Prod. String

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after **sandfrac and shot** **100** BOPD
~~submerg~~

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential

Size choke in inches **On Pump**Date first oil run to tanks or gas to Transmission system: **3/15/55**Transporter taking Oil or Gas: **The Texas Company (Trucks)**

Casing and Cementing Record

Size Feet Sax

| | | |
|--------|-------|-----|
| 8-5/8" | 246 | 100 |
| 5-1/2" | 3053' | 100 |
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| | | |

Remarks:

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: *L. G. Stanley*

Title _____

GEORGE H. WILLIAMS

(Company or Operator)

By: *Juanita Denton*

(Signature)

Title **Agent**

Send Communications regarding well to:

Name **Miss Juanita Denton****P. O. Box 308**Address **Artesia, New Mexico**