N. .MEXICO OIL CONSERVATION CC...MISSION
Santa Fe, New Mexico

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico   **4-14-55**
....
(Place)   (Date)

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

Cities Service Oil Company   Government "C", Well No. **8**, in **SW** ¼ **SE** ¼,
(Company or Operator)   (Lease)

0........................, Sec **33**, T **13-S**, R **31-E**, NMPM., **Undesignated**........................Pool
(Unit)

Chaves........................County. Date Spudded **3-27-55**, Date Completed **4-7-55**

Please indicate location:

Elevation **4195' (D.F.)** Total Depth **2813'**, P.B. **-**

Top oil/gas pay **2796'** .... Name of Prod. Form **Queen**

Casing Perforations: **-** ....or

Depth to Casing shoe of Prod. String **2792'**

Natural Prod. Test **-** ....BOPD

based on **-** bbls. Oil in **-** Hrs **-** Mins.

Test after ~~acid or shot~~ **frac** **263** ....BOPD

Based on **76.7** bbls. Oil in **7** Hrs **-** Mins.

Gas Well Potential **-**

Size choke in inches **3/4"**

Date first oil run to tanks ~~or gas to Transmission system~~: **4-7-55**

Transporter taking Oil or Gas: **Cities Service Oil Co.-Trucks**

Casing and Cementing Record

Size	Feet	Sax
8 5/8"	160	125
5 1/2"	2783	300

Remarks: **This well was sandfraced with 8000 gals., 4000# sand, maximum pressure 2350# at 13.7 barrels per minute. Total load & treatment 416 barrels.**

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

Approved........................, 19........

Cities Service Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _[signature]_

By: _[signature]_
(Signature)

Title ....

Title **Dist. Supt.**

Send Communications regarding well to:

Name **George M. Geyer**

Address **Box 97, Hobbs, New Mexico**