## NEV TEXICO OIL CONSERVATION COMT ON 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

Roswell. New Mexico. Sept. 3, 1957.

				Roswell, New Mexico. Sept. 3, 1957.  (Place) (Date)	
		-		OR A WELL KNOWN AS:	
Bi (C	III A. S	nelton	Gulf State	, Well No. 1, in NE 1/4,	
Timbt 1	Letter			1E , NMPM., Caprock Pool	
Chav	70 <b>8</b>		County. Date Spudded.	6-12-57 Date Drilling Completed 6-25-57	
	Please indicate location:		Elevation 11118 Total Depth 3125 PBTD		
D	C B		Top Oil/Gas Pay 308	Name of Prod. Form. Queen	
		-	PRODUCING INTERVAL -		
E	F G	H	Perforations 3080	-3086	
		"	Open Hole	Depth Casing Shoe 3123 Depth Tubing 3051	
			OIL WELL TEST -		
L	K J	I	Natural Prod. Test:	Chokebbls.oil,bbls water inhrs,min. Size	
				ure Treatment (after recovery of volume of oil equal to volume of	
М	N O	P	load oil used): 65	bbls.oil, 5 bbls water in 24 hrs, min. Size Pumpin	
			GAS WELL TEST -		
			. Natural Prod. Test:	MCF/Day; Hours flowedChoke Size	
tubing ,Ce	asing and Cem	enting Recor	d Method of Testing (pitot	, back pressure, etc.):	
Size	Feet	SAX	Test After Acid or Fract	ure Treatment: MCF/Day; Hours flowed	
8-5/8	8 295	125 sk	Choke Size Meth	od of Testing:	
			haid on Frankus Trankus	nt (Give amounts of materials used, such as acid, water, oil, and	
5-1/2	2 3126	250 sk	sand): 10,000# frac sd; 10.000 gal lease oil		
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<b></b>	_	ļ · · · · · · · ·		s-New Mexico Pipe Line	
			Gas Transporter		
Remarks:.					
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I here	eby certify the	hat the info	rmation given above is tr	ue and complete to the best of my knowledge.	
Approved.			, 19	Bill A. Shelton (Company or Operator)	
c	DIL CONSE	RVATION	COMMISSION	Byno Mil en Mrs. Neil Perrin	
				(Signature)	
Ву:		in filming		Title Send Communications regarding well to:	
Γitle	,	<i>.</i>		Name Shelton-Warren Oil Co.	
				Address734 Petr. Bldg., Roswell, N. M.	