## NEW EXICO OIL CONSERVATION COMM SION Santa Fe, New Mexico

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

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

HOBBS OFFICE OCC

New Well

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 thin 2 file 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.

			Artesia, New Mexico October 22, 1957
			(Place) (Date)
		-	FING AN ALLOWABLE FOR A WELL KNOWN AS:
(Co	mpany or O	perator)	Inc. Curper Superior "B" , Well No. 3 , in NE 1/4 1/4
J	Sec	30	T 13 S R 32 E NMPM, Undesignated
			County. Date Spudded 9-13-57 Date Drilling Completed
Pleas	e indicate	location:	Elevation GL 4366 Total Depth 3090 PBTD 3083  Top Oil/Gas Pay 3060 Name of Prod. Form.
D	C B	A	
	İ		PRODUCING INTERVAL -
E	F G	H	Perforations
			Depth Subs Depth Open Hole Casing Shoe Tubing
L	KJ	l i	OIL WELL TEST -
-	^   "	×	Natural Prod. Test: <b>none</b> bbls.oil,bbls water inhrs,min. Siz
			Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume
M	N O	P	load oil used): 44 bbls.oil, 0 bbls water in 24 hrs, min. Size
	İ		GAS WELL TEST -
bing Cas	ing and Cem	enting Reco	Natural Prod. Test: MCF/Day; Hours flowed Choke Size
Size	Feet	Sax	(percent percentage)
<del></del>	1		Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
3 5/8	235	150	Choke SizeMethod of Testing:
4 1/2	3091.50	125	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, a
			sand): A.w/250 mg, 10,000 gais, ise, crude, 10,000 ad, 850 adomite
2" tbg.	3043	İ	Casing O Tubing O Date first new Press. O Press. O oil run to tanks
			Oil Transporter Texas-New Mexico Pipe Line Company
		<u> </u>	Gas Transporter
marks:			
····		••••••	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	••••••		<u> </u>
I hereb	y certify th	at the info	formation given above is true and complete to the best of my knowledge.
	•		Carper Drilling Company, Inc.
			(Company or Ondrator)
OI	L CONSE	RVATION	N COMMISSION By: O Youthe Youte (Signature)
7	<b>%</b> (//		Vice-President
			Title Send Communications regarding well to:
le	<i>y</i> :		Carper Drilling Company, Inc.
			Name Artesia, N. M.
			Wildliff IA We