

NEW MEXICO OIL CONSERVATION COMMISSION
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 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 July 26, 1957
(Place) (Date)

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

Sinclair Oil & Gas Company Helen G. Kendrick Well No. 1, in SW $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)
9, Sec. 5, T. 12S, R. 30E, NMPM., North Gladiala Devonian Pool
Unit Letter

Lea County. Date Spudded 5-2-57 Date Drilling Completed 7-24-57
Elevation 3865 Total Depth 12004 PBD 12002

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 11971 Name of Prod. Form. Devonian

PRODUCING INTERVAL -

Perforations 11971 - 11984

Open Hole None Depth Casing Shoe 12004 Depth Tubing 11964

OIL WELL TEST -

Natural Prod. Test: 55 bbls. oil, 0 bbls water in 5 hrs, 0 min. Size 3 1/2 Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 295 bbls. oil, 0 bbls water in 14 hrs, 0 min. Size 12/64" 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): 500 gal. Mud Acid

Casing Tubing Date first new Press. 10000 Press. 17000 oil run to tanks 7-26-57

Oil Transporter Magnolia Pipe Line Company

Gas Transporter _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>13 3/8</u>	<u>311</u>	<u>350</u>
<u>8 5/8</u>	<u>4520</u>	<u>2500</u>
<u>5 1/2</u>	<u>12004</u>	<u>150</u>
<u>2"</u>	<u>11964</u>	

Remarks: New Well

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

Approved: _____, 19____ Sinclair Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____ Title: District Superintendent

Title _____ Send Communications regarding well to:

Name G. C. Salter

Address 520 E. Broadway - Hobbs, New Mexico

Orig & 3 cc: CCC
cc: FHR, WFD, File