

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

11-5-56

(Place)

(Date)

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

Sunray Mid-Continent Oil Company

M. Powell

Well No. **1**, in **SE** $\frac{1}{4}$ **SE** $\frac{1}{4}$,

(Company or Operator)

(Lease)

P

Sec. **18**

T. **12-S**

R. **38-E**

NMPM.,

Undesignated

Pool

Unit Letter

Lea

County. Date Spudded **9-17-56**

Date Completed **12-3-56**

Please indicate location:

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

Elevation **3878 DF** Total Depth **11,990** P.B. **11,986**

Top oil/gas pay **11,965** Name of Prod. Form **Devonian**

Casing Perforations: **11,966-11,984** or

Depth to Casing shoe of Prod. String **11,986**

Natural Prod. Test **384** BOPD

based on **160** bbls. Oil in **10** Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential

Size choke in inches **12/64**

Date first oil run to tanks or gas to Transmission system: **12-3-56**

Transporter taking Oil or Gas: **Service Pipe Line Co**

Casing and Cementing Record

Size Feet Sax

13 3/8	398	400
9 5/8	4469	2858
5 1/2	11,986	350

Remarks: **Well not treated - Hole was loaded with oil before completing.**

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

Approved **DEC 6 1956**, 19

Sunray Mid-Continent Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

By: **R. F. Montgomery**

PRORATION MANAGER

Title

Title **Hobbs Area Superintendent**

Send Communications regarding well to:

Name **Sunray Mid-Continent Oil Company**

Address **Box 128 - Hobbs, New Mexico**