

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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico March 10, 1961

(Place)

(Date)

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

TRICE PRODUCTION COMPANY St. J. M. Lucy J, Well No. 1, in NE 1/4 NW 1/4,

(Company or Operator)

(Lease)

C

2

T

143

R

33E

NMPM,

Undesignated

Pool

Unit Letter

County. Date Spudded 1/1/61

Date Drilling Completed 2/14/61

Elevation 4214 DF

Total Depth 9778

PBTD 9325

Please indicate location:

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

660' fr N & 1960' fr W

Top Oil/Gas Pay 9780

Name of Prod. Form. Pore

PRODUCING INTERVAL -

Perforations 9786-9794 w/A EPP

Open Hole Depth 9770

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 41 bbls. oil, 4 hrs 20 min. Size 2 1/2" Choke

GAS WELL TEST -

.9% water

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): 4/500 gal 15% HA

Casing Tubing Date first new 2/20/61

Press. 540F oil run to tanks

Oil Transporter Texas New Mexico Pipe Line Company

Gas Transporter None, new well

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8	350	365
8-5/8	1094	2200
5-1/2	9978	300
2-1/2	*	9770

Remarks:

C-123 filed for extension to Lucy J - This form filed to correct total depth.

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

Approved _____, 19____

TRICE PRODUCTION COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____ (Signature)

Agent

Title: Send Communications regarding well to:

P. O. Box 107 Midland, Texas

Name

Address

Title