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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 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.

Midland, Texas

February 17, 1962

(Place)

(Date)

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

Bob Dean, Ltd.

Mobil-State "7"

Well No. 1

in SW 1/4 NW 1/4

(Company or Operator)

E

Sec. 7

T-16-S

(Lease)

R-32-E

NMPM,

Undesignated

Pool

Unit Letter

Lea

County. Date Spudded 1-9-62

Date Drilling Completed 1-19-62

Please indicate location:

Elevation 4376 Gr.

Total Depth 4115

PBTD 4108

Top Oil/Gas Pay 4038

Name of Prod. Form. Premier Sand

PRODUCING INTERVAL -

Perforations 4044-54 (3 shots/ft.)

Open Hole -

Depth Casing Shoe 4110

Depth Tubing 4020

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 49 bbls. oil, 0 bbls water in 24 hrs, - min. Choke Size 2"

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): 1000 bbls. oil, 61,000# sand

Casing Press. 570# Tubing Press. 220# Date first new oil run to tanks 1-30-62

Oil Transporter The Permian Corporation

Gas Transporter None

Remarks:

40.43 acres

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

Approved _____, 19 _____

Bob Dean, Ltd.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

By: _____

Title Agent

Send Communications regarding well to:

Title _____

Name E. V. Pickett

909 Midland Savings Bldg.

Midland, Texas