

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-102 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 September 23, 1959
(Place) (Date)

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

Aztec Oil & Gas Company State "NM", Well No. 1, in SW 1/4, SE 1/4,
(Company or Operator) (Lease)
M, Sec. 31, T. 16S, R. 32E, NMPM, Under signed Pool
Unit Letter
Lea

Please indicate location:

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

31-16S-32E

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8"	332	250
4 1/2"	4019	200
2"	3950	

County. Date Spudded. 9-2-59 Date Drilling Completed 9-13-59
Elevation 4084 Gr Total Depth 4019' PBD 4086'

Top Oil/Gas Pay 3802 Name of Prod. Form. Grayburg-San Andres

PRODUCING INTERVAL -

Perforations 3802-06, 3808-18', 3821-49', 3957-72'

Open Hole Depth Casing Shoe Depth Tubing

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): 51 bbls. oil, - bbls water in 24 hrs, min. Choke Size 14/64"

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):

Casing Tubing Date first new Press. Packer Press. 500 oil run to tanks 9-28-59

Oil Transporter McWood Corp.

Gas Transporter Gas flared - no pipeline connection.

Remarks:

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

Approved: 19

Aztec Oil & Gas Company

(Company or Operator)

original signed by

By: ALBERT DUKE (Signature)

OIL CONSERVATION COMMISSION

Title District Superintendent

Send Communications regarding well to:

Name Aztec Oil & Gas Company

Address Box 947, Hobbs, New Mexico

By:

Title