

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.

Hobbs, New Mexico

8/16/57

(Place)

(Date)

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

TESNESSEE GAS TRANSMISSION CO. State Western A, Well No. 1, in SW 1/4 SE 1/4,

(Company or Operator)

(Lease)

0, Sec. 20, T-16-S, R-34-E, NMPM., Kammits-Wolfcamp Pool

Unit Letter

Les

County. Date Spudded 5/29/57 Date Drilling Completed 8/14/57

Elevation 4117.5 Total Depth 10,828 PBD 10,758

Please indicate location:

Top Oil/Gas Pay 10,600 Name of Prod. Form. Wolfcamp

PRODUCING INTERVAL -

Perforations 10,643-90', 10,600-30'

Open Hole 0 Depth 10,823 Depth Tubing 10,543

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 384 bbls. oil, 0 bbls water in 24 hrs, min. Size Choke 24/64"

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): 1000 gallons mud acid

Casing Press. 0 Tubing Press. 300 Date first new oil run to tanks 8/13/57

Oil Transporter Gulf Refining Co.

Gas Transporter None

Tubing, Casing and Cementing Record

Size Feet Sx

13 3/8	361	400
8 5/8	4553	3600
5 1/2	10808	290
2 3/8	10543	--

Remarks:

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

Approved: 19

TESNESSEE GAS TRANSMISSION COMPANY

(Company or Operator)

By: J.H. Hudgens (Signature)

District Production Clerk

Title

Send Communications regarding well to:

Name Tennessee Gas Transmission Company

Address 203 North Linan, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: E. J. Fisher

Title