

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (~~WATER~~) 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

October 11, 1957

(Place)

(Date)

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

Shell Oil Company

State WD

Well No. 1

in NE

SW

1/4

(Company or Operator)

(Lease)

K

Sec. 29

T -16-S

R -34-E

NMPM,

Kennitz-Wolfcamp

Pool

Unit Letter

Lea

County. Date Spudded. 7-6-57

Date Drilling Completed 8-30-57

10,840'

Please indicate location:

Elevation 4132

Total Depth 10,894

PBTD

10,865

Top Oil/ Gas Pay 10,797

Name of Prod. Form.

Wolfcamp

PRODUCING INTERVAL -

Perforations 10,797'-10,803', 10,811'-10,816', 10,822'-10,832' & 10,849'

Open Hole -

Depth

Casing Shoe 10,894'

Depth

Tubing 8517'

16 OIL WELL TEST -

S 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): 124 bbls. oil, 130 bbls water in 24 hrs, _____ min. Size _____

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 Gals. MCA, 1300 Gals. 15% acid.

Casing _____ Tubing _____ Date first new _____

Press. _____ Press. _____ oil run to tanks _____

Oil Transporter Gulf Refining Co., Western Pipe Line Division

Gas Transporter none

Section 29, Unit K

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	355	400
8 5/8	4,567	2050
5 1/2	10,894	100

Remarks: _____

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

Approved _____, 19 _____

Shell Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: Rex C. Cabaniss Original Signed By

(Signature)

Rex C. Cabaniss

Title: District Exploitation Engineer

Send Communications regarding well to:

Name: Shell Oil Company

Address: Box 1957, Hobbs, New Mexico

By: [Signature]

Title: _____