

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**Santa Fe, New Mexico**

(Form C-104)  
 (Revised 7/1/52)

**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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Box 547 Hobbs, New Mexico 10/18/54  
 (Place) (Date)

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

**Tide Water Associated Oil Company** State "P" Unit, Well No. 4-D, in SE 1/4 SW 1/4,  
 (Company or Operator) (Lease)  
 N 32, Sec. 32, T. 16-S, R. 37-E, NMPM, Lovington Abo Pool  
 (Unit)  
 Lea County. Date Spudded 8-12-54, Date Completed 10-15-54

Please indicate location:

	X		

32-16S-37E

**Casing and Cementing Record**

Size Feet Sax

13-3/8"	Set At 333'	350
8-5/8"	3495'	1250
Liner 5-1/2"	8414'	532
	Hung At 3313'	

Elevation 3816 D.F. Total Depth 8415', P.B. 8397'

Top oil/gas pay 8340' Name of Prod. Form Abo

Casing Perforations: 8340' to 8380' or

Depth to Casing shoe of Prod. String 8414'

Natural Prod. Test No Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot 182.26 BOPD

Based on 121.50 bbls. Oil in 16 Hrs. Mins.

Gas Well Potential

Size choke in inches 1/4"

Date first oil run to tanks or gas to Transmission system: 10-15-54

Transporter taking Oil or Gas: Texas-New Mexico Pipe Line Co

Remarks:

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

Approved \_\_\_\_\_, 19. \_\_\_\_\_  
 TIDE WATER ASSOCIATED OIL COMPANY  
 (Company or Operator)

OIL CONSERVATION COMMISSION

By: *H.P. Shackelford* H.P. Shackelford  
 (Signature)

By: *S.G. Stanley* Title: District Foreman

Title \_\_\_\_\_ Send Communications regarding well to:

Name: H.P. Shackelford

Address: Box 547 Hobbs, New Mexico