| | | · · · · · · · · · · · · · · · · · · · | | |
|---|-------------------|---------------------------------------|---------------------------------------|--|
| SANTA FE | DISTRI | | | Santa Fe. New Mexico HOBDS OFFICE O. C. C. |
| U.B.G.S. | E | | | REQUEST FOR (UIL) - (GAS) ALLOWARLE |
| TRANSPORTE | KA I | | | JAN 5 9 19 MAR BAS |
| PROBATION C | or ice | | A | JAH 3 G 19 Recompletion |
| Thi | s forn | shall be | solominted ! | by the operator before an initial allowable will be assigned to any completed Oil or Gas well. |
| Form C- | -104 i: Ibe a | s to be sul ssigned ef | bmitted in Fective 7:0 | UADRUPLICATE to the same District Office to which Form C-101 was sent. The allow- A.M. on date of completion or recompletion, provided this form is filed during calendar |
| month o | of cor | npletion of | or recomple | tion The completion date shall be that date in the case of an oil well when new oil is deliv- |
| ered int | to the | stock tan | ks. Gas mu | it be reported on 15.025 psia at 60° Fahrenheit. Hobbs, New Mexico Jan 2, 1964 |
| | | | | (Place) (Date) |
| WE AR | E HE | EREBY R | EQUESTI | NG AN ALLOWABLE FOR A WELL KNOWN AS: |
| •••• | | Cactus | Drill | ing Company Sichie St. Well No. 2, in NE 1/4, NE 1/4, |
| | | pany or Oj Sec | • 16 | (Lease) , T16, R |
| Uni | i Lotte | # # | · · · · · · · · · · · · · · · · · · · | |
| • · · · · · · · | ••••• | ••••••••••• | | County. Date Spudded 8-28-63 Date Drilling Completed 9-2-63 Elevation 4337 DF Total Depth 3485 PBTD 3456 |
| | | | | Top Oil/Gas PayName of Prod. FormQueen |
| D | C | В | A | PRODUCING INTERVAL - |
| | | | x | Perforations 3406-3410 |
| E | I | G | H | Open Hole Depth Depth Depth Depth J485 Depth J412 |
| | | | | |
| L | K | . J | I | OIL WELL TEST - Choke Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size |
| | | | | Natural Prod. lest:DDis.oll,DDis water innrs,min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of |
| M | | | P | load oil used): 53 bbls.oil, 110 bbls water in 24 hrs, 0 min. Size Swabbed |
| | | | | GAS WELL TEST - |
| 6601 | PNT. | 660 | RT. | Natural Prod. Test: Squeesed Off/Day; Hours flowed Choke Size |
| (FOUTAGE) Subing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.): | | | | |
| Tubing | • | ng and Ges Feet | SAR | Test After Acid or Fracture Treatment:MCF/Day; Hours flowed |
| | | | 1 | Choke SizeMethod of Testing: |
| 8- | 5/8 | 355 | 200 | |
| 4- | 1/2 | 3474 | 125 | Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): treated w/250 gal reg 156 acid and swabbed |
| | | | 1 | |
| | | | ļ | Casing Tubing Date first new 12/23/65 6 |
| | | | | Gil Transporter Texas-New Mexico Pipeline Co, Midland, Tex Gas Transporter Phillips Petroleum Co., Buckeye, New Mexico |
| | | | | exed off gas and recompleted as an oil well per |
| Remark | ks:l 1 C- | loj su | bmitted | 1/2/64. |
| | | | | |
| | | | hat the inf | ormation given above is true and complete to the best of my knowledge. |
| | neren) weg | y ceruiy t | | , 19, 19 |
| reprov | - W M | | | COMMISSION By: Lea U Baker |
| | OIJ | Ç CONSE | ERVATION | COMMISSION By: Jula (Signature) |
| _ 4 | Ĺ | T | | Tisle Vice-President |
| By: | , 4. / | • | | Send Communications regarding well to: |
| Title | ••••• | | | Name. Mr. Geo. W. Baker Box 1826, Hobbs, New Mexico |
| | | | | ROX INZO, HODDS, NEW MEXICO |