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# NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

## 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.

Midland, Texas

11-16-64

(Place)

(Date)

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

John L. Cox

(Company or Operator)

(Lease)

Well No. 3, in NW 1/4 NW 1/4,

D Sec. 33, T -16-S, R-37-E, NMPM, Lovington (Paddock) Pool

Unit Letter

Lea

County. Date Spudded 9-30-64 Date Drilling Completed 10-21-64

Elevation 3798' D.F. Total Depth 6318 PBD 6318

Please indicate location:

Top Oil/Gas Pay 6177 Name of Prod. Form. Paddock

PRODUCING INTERVAL -

Perforations 6198-6206'; 6218-6226'; 6244-6250'

Open Hole Depth Casing Shoe 6318 Depth Tubing 6225

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 Choke load oil used): 70 bbls. oil, 5 bbls water in 24 hrs, - min. Size pump

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 gal. acid; 15,000 acid frac & 15,000# sand

Casing Tubing Date first new 11-3-64  
Press. Press. oil run to tanks

Oil Transporter Texas-New Mexico Pipe Line Co.

Gas Transporter Shelly Oil Co.

Remarks:

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

Approved: 11-16-64, 19

John L. Cox

(Company or Operator)

By: (Signature)

Title: Owner

Send Communications regarding well to:

Name: John L. Cox

Address: 305 V & J Tower, Midland, Texas

OIL CONSERVATION COMMISSION

By:

Title: