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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**Santa Fe, New Mexico**  
**REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE**

(Form C-104)  
 Revised 7/1/59

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 QUADRUPPLICATE 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**

**August 23, 1960**

(Place)

(Date)

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

**Phillips Petroleum Company**

**Williams**

Well No. **1**, in **SE**  $\frac{1}{4}$  **NE**  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

**H**

Sec. **33**

T. **17S**

R. **33E**

NMPM,

**Undesignated**

Pool

Unit Letter

**Lea**

County. Date Spudded. **6-17-60**

Date Drilling Completed **8-3-60**

Please indicate location:

Elevation **4126 (DF)** Total Depth **8860** PBDT **8843**

Top Oil/Gas Pay **8734** Name of Prod. Form. **Abo Reef**

PRODUCING INTERVAL -

Perforations **8734-8804**

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe \_\_\_\_\_ Depth \_\_\_\_\_ Tubing **8807**

OIL WELL TEST -

Natural Prod. Test: **5** bbls. oil, **0** bbls water in **1** hrs, **0** min. Size **2 1/2** Choke **24/64**

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **247** bbls. oil, **0** bbls water in **24** hrs, **0** min. Size **24/64** 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): **(1) Acidize w/500 gallons** **(2) Acidized with 7000 gals.**

Casing Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
 Press. **(2) 4600** Press. \_\_\_\_\_ oil run to tanks **August 15, 1960**

Oil Transporter **The Permian Corp. (trucks)**

Gas Transporter **-**

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
<b>13-3/8</b>	<b>204</b>	<b>350</b>
<b>8-5/8</b>	<b>4574</b>	<b>1060</b>
<b>5-1/2</b>	<b>8847</b>	<b>460</b>

Remarks: \_\_\_\_\_

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

Approved \_\_\_\_\_, 1960.

**Phillips Petroleum Company**

(Company or Operator)

By: \_\_\_\_\_  
 (Signature)

Title **District Chief Clerk**

Send Communications regarding well to:

**Phillips Petroleum Company**

Name \_\_\_\_\_

Address **Box 2105, Hobbs, New Mexico**

**OIL CONSERVATION COMMISSION**

By: \_\_\_\_\_  
 Title \_\_\_\_\_