

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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.

Abilene, Texas

10-22-62

(Place)

(Date)

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

James P. Dunigan

State "B"

Well No. **2**

NW

NE

(Company or Operator)

(Lease)

B

Sec. **2**

T. **18 S**

R. **33 E**

NMPM,

Corbin Abo

Pool

Lee

County. Date Spudded **7-11-62**

Date Drilling Completed **8-13-62**

Please indicate location:

| | | | |
|---|---|---|---|
| D | C | B | A |
| E | F | G | H |
| L | K | J | I |
| M | N | O | P |

Elevation **4125**

Total Depth **8890**

PBTD **8862**

Top Oil/Gas Pay **8681**

Name of Prod. Form. **Abo Reef**

PRODUCING INTERVAL -

Perforations **8704-14', 8720-26', & 8734-43'**

Open Hole

Depth

8890'

Depth

8860'

OIL WELL TEST -

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): **241** bbls. oil, **0** bbls water in **24** hrs, **0** min. Size **16/64**

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): **1000 gallons of mud acid**

Casing **0** Tubing **400** Date first new **10-21-62**
Press. _____ Press. _____ oil run to tanks

Oil Transporter **Texas New Mexico Pipe Line Company**

Gas Transporter **Phillips Petroleum Company**

Tubing, Casing and Cementing Record

| Size | Feet | Sax |
|---------------|-------------|-------------|
| 11 3/4 | 317 | 300 |
| 8 5/8 | 3200 | 250 |
| 4 1/2 | 8890 | 1650 |
| 2 3/8 | 8860 | |

Remarks:

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

James P. Dunigan

Approved _____, 19____

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

By: _____

(Signature)

Superintendent

Title _____

Send Communications regarding well to:

Name **James P. Dunigan**

Address **415 Citizens Nat'l Bk., Abilene, Tex.**