

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 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 12-15-61

(Place)

(Date)

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

Moran Oil Prod. & Drlg. Corp. State "T", Well No. **1**, in **SW** $\frac{1}{4}$ **NW** $\frac{1}{4}$,
(Company or Operator) (Lease)

E, Sec. **17**, T. **18**, R. **38**, NMPM, **Hobbs** Pool
Unit Letter

Lea

County. Date Spudded **11-22-61** Date Drilling Completed **11-30-61**

Please indicate location:

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

Elevation **3670 D F** Total Depth **4236** PBTD **4234**

Top Oil/Gas Pay **4182** Name of Prod. Form. **Grayburg**

PRODUCING INTERVAL -

Perforations **4182-84; 4202-04; 4214-16**

Open Hole Depth Casing Shoe **4236** Depth Tubing **4180**

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **116** bbls. oil, **0** bbls water in **16** hrs, _____ min. Choke Size **20/64**

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): **30,000 gal. R.O. & 90,000#**

Casing Tubing Date first new Press. **780** Press. **240** oil run to tanks **12-5-61**

Oil Transporter **Atlantic Pipeline**

Gas Transporter **Phillips**

Remarks: **After Acid Swab at rate of 10 BOPD**
After Fracture Flow 116 BO/16 hrs.

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

Approved _____, 19____

Moran Oil Prod. & Drlg. Corp.

(Company or Operator)

By: **P. M. Moran** **R. M. Moran**
(Signature)

OIL CONSERVATION COMMISSION

By: _____

Title: **Operator**

Send Communications regarding well to:

Title _____

Name: **Moran Oil Prod. & Drlg. Corp.**

Address: **Box 1718, Hobbs, New Mexico**

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Moran Oil Prod. & Drilg. Corp. Lease State "T" #17

Well No. 1 Unit Letter E S 17 T 18 R 38 Pool Hobbs

County Lea Kind of Lease (State, Fed. or Patented) _____

If well produces oil or condensate, give location of tanks: Unit E S 17 T 18 R 38

Authorized Transporter of Oil or Condensate Atlantic Pipeline

Address Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Phillips Gas

Address Hobbs, New Mexico

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

New Well -- No Connection.

Reasons for Filing: (Please check proper box) New Well ☒ (X)

Change in Transporter of (Check One): Oil ☐ Dry Gas ☐ C'head ☐ Condensate ☐

Change in Ownership ☐ Other ☐

Remarks:

(Give explanation below)

NAME CHANGE
ATLANTIC P.L. CO.
TO
ARCO P.L. CO.
EFF. 1-1-71

MAY 1, 1970, STANDARD OIL
COMPANY OF TEXAS IS CHANG-
ING ITS OPERATING NAME TO
CHEVRON OIL COMPANY.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Com-
mission have been complied with.

Executed this the 15th day of December 19 61

By R. M. Moran

Title Operator

Approved _____ 19 _____

OIL CONSERVATION COMMISSION

Company Moran Oil Prod. & Drilg. Corp.

Address Box 1718, Hobbs, New Mexico

By _____

Title _____