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LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

HOODS OFFICE 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.

Hobbs, New Mexico September 23, 1960

(Place)

(Date)

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

Gulf Oil Corporation

D. W. Hardin

Well No. 7, in NW 1/4 NE 1/4

(Company or Operator)

(Lease)

B

Sec. 18

T18-S

R 38-E

NMPM,

Hobbs

Pool

Unit Letter

Lee

County. Date Spudded 8-27-60

Date Drilling Completed 9-6-60

Please indicate location:

Elevation 3671' Total Depth 4200' PBD 4194'

Top Oil/Gas Pay 4165' Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 4165', 4175' & 4186'

Open Hole Depth Casing Shoe Depth Tubing 4166'

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 load oil used): 152 bbls. oil, 1 BAR bbls water in 23 hrs, min. Size 26/64"

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): 15,000 gals ref. oil, 1-1/2" SPG & 1/40" Adomite M-II per gal.

Casing 4000' Tubing Date first new September 21, 1960
Press. 1300' Press. oil run to tanks

Oil Transporter Shell Pipeline Corp.

Gas Transporter Phillips Petroleum Co.

Remarks:

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

Approved _____, 19____

Gulf Oil Corporation

ORIGINAL SIGNATURE (Company or Operator)

-BY-

By: J. M. RUSSELL

(Signature)

Title Area Production Manager

Send Communications regarding well to:

Gulf Oil Corporation

Name

Box 2167, Hobbs, New Mexico

Address

OIL CONSERVATION COMMISSION

By: _____

Title