

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 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

JAN. 23, 1962

(Place)

(Date)

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

MORAN OIL PROD. & DRLG. CORP.

HOBBS

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

(Company or Operator)

(Lease)

H, Sec. 34, T. 18, R. 38, NMPM, HOBBS Pool

Unit Letter

LEA

Please indicate location:

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

34-18-38

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	368	250
4 1/2	4303	500

County. Date Spudded 11-29-61 Date Drilling Completed 12-26-61

Elevation 3630 Total Depth 4303 FBTD 4264

Top Oil/Gas Pay 4236 Name of Prod. Form. GRAYBURG

PRODUCING INTERVAL -

Perforations 4236-40; 4248-50

Open Hole _____ Depth _____ Casing Shoe 4303 Depth _____ Tubing 4200

OIL WELL TEST -

Natural Prod. Test: 10 bbls. oil, 0 bbls water in 24 hrs, _____ min. Choke 2

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 45 bbls. oil, 0 bbls water in 24 hrs, _____ min. Choke 16/64

GAS WELL TEST -

Natural Prod. Test: 10 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): 2000 GAL ACID. 40,000 GALS PLUS 72,500 #

Casing _____ Tubing _____ Date first new _____
Press. 650 Press. 170 oil run to tanks 1-10-62

Oil Transporter SHELL OIL CO. PURCHASER; WESTERN OIL TRANSPORTER

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____

MORAN OIL PROD. & DRLG. CORP.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: R. M. Moran R. M. MORAN
(Signature)

Title OPERATOR
Send Communications regarding well to:

Name MORAN OIL PROD. & DRLG. CORP.

Address Box 1718, HOBBS, NEW MEXICO

By: _____

Title _____