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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.

Midland, Texas

Feb. 24, 1964

(Place)

(Date)

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

Southern New Mexico Oil Corp. Lusk Deep Unit, Well No. 6, in SW 1/4 SW 1/4,
(Company or Operator) (Lease)
M, Sec. 19, T. 19-S, R. 32-E, NMPM, Lusk Strawn Pool
Unit Letter

Lea

County. Date Spudded 12/16/63

Date Drilling Completed 2/9/64

Please indicate location:

Elevation 3536 Total Depth 11,432 PBTD 11,401

Top Oil/Gas Pay 11,325 Name of Prod. Form. Strawn

PRODUCING INTERVAL -

Perforations 11325-11371'

Open Hole Depth Casing Shoe 11,432 Depth Tubing 11,390

OIL WELL TEST -

Natural Prod. Test: 424 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size 13/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): bbls. oil, bbls water in hrs, min. Choke Size

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):

Casing Press. 1500 Tubing Press. 1770 Date first new oil run to tanks Feb. 21, 1964

Oil Transporter Permian Corp.

Gas Transporter Phillips Petroleum Co.

Remarks: Washed perforation with 1000 gal. acid
G.O.K. 1658 cu ft/bbl

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

Approved: Southern New Mexico Oil Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: D.H. Crews
(Signature)

By:

Title: Agent

Title:

Send Communications regarding well to:

Name: Southern New Mexico Oil Corp.

Address: Box 1059, Midland, Texas