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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)

Santa Fe, New Mexico

Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

POSTS OFFICE BOX

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.

Midland, Texas

August 2, 1963

(Place)

(Date)

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

DOB Oil Properties, Inc., State M, Well No. 2, in SE 1/4 NW 1/4,
(Company or Operator) (Lease)
T 188, R 348, NMPM, K. - Queen Pool

Unit Letter

Loa

County Date Spudded 7/21/63

Date Drilling Completed 7/29/63

Please indicate location:

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

Elevation 4095 GL Total Depth 4421 PBD 4386

Top Oil/Gas Pay 4348 Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 4348 - 4355

Open Hole Depth 4421 Casing Shoe 4429 Depth Tubing 4380

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): 210 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 20/64 Choke

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. 30,000 lb. sand

Casing Press. Tubing Press. 40 Date first new oil run to tanks 8/8/63

Oil Transporter State-New Mexico Pipe Line Company

Gas Transporter None

Remarks:

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

Approved , 19

DOB Oil Properties, Inc.

(Company or Operator)

By: (Signature)

Title Agent

Send Communications regarding well to:

Name DOB Oil Properties, Inc.

Address Box 953, Midland

OIL CONSERVATION COMMISSION

By:

Title