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	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

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
(Place)

November 26, 1962
(Date)

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

Phillips Petroleum Company Santa Fe, Well No. **75**, in **NW** $\frac{1}{4}$ **NW** $\frac{1}{4}$,
(Company or Operator) (Lease)
D, Sec. **25**, T. **17-S**, R. **35-E**, NMPM, **Undiscovered** Pool
Unit Letter

Lea County, Date Spudded **10-18-62** Date Drilling Completed **11-12-62**
Elevation **3915' (Gr)** Total Depth **9000'** PBD **8961'**

Please indicate location:

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

Top Oil/Gas Pay **8688'** Name of Prod. Form. **Abo**

PRODUCING INTERVAL -

Perforations **8692 - 8902'**

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing **8680'**

OIL WELL TEST -

Natural Prod. Test: **None prior to acid treatment** Choke Size _____
_____ bbls. oil, _____ bbls. water in _____ hrs, _____ min.

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke
load oil used): **296** bbls. oil, **9** bbls. **acid** water in **24** hrs, **0** min. Size **30/64"**

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) **(1) 1000 15% reg acid (2) 20000 15% reg w/427,500 a.f. CO₂**

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. **(2) 6200** oil run to tanks **November 24, 1962**

Oil Transporter **Texas-New Mexico Pipeline Company**

Gas Transporter **Phillips Petroleum Company**

990' FWL, 333' FWL Sec 25
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8	332	350
8-5/8	3400	400
5-1/2	9000	560

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved _____, 19____
Phillips Petroleum Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____
Title _____

By: **W. E. Croston**
(Signature)

Title **District Chief Clerk**

Send Communications regarding well to:

Name **Phillips Petroleum Company**

Box 2105 - Hobbs, New Mexico