

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 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.

P. O. Box 4395, Midland, Texas 9-10-62
(Place) (Date)

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

Cabot Corporation ~~State of New Mexico~~ "I" ~~100~~ Well No. **3**, in ~~SE~~ **SE** $\frac{1}{4}$ ~~NW~~ **NW** $\frac{1}{4}$,
(Company or Operator) (Lease)
F ~~Unit Letter~~, Sec. **23**, T. **19-S**, R. **35-E**, NMPM., **Pearl Queen** Pool

Lea

Please indicate location:

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

No. 3

County. Date Spudded **8-8-62** Date Drilling Completed **8-20-62**
Elevation **3776'** Total Depth **5038'** PBD

Top Oil/Gas Pay **4945** Name of Prod. Form. **Queen Sand**

PRODUCING INTERVAL -

Perforations **4945-47; 4952-54 and 4958-60**

Open Hole **5029-5038** Depth **5019** Casing Shoe **5019** Depth **5030** Tubing

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **66** bbls. oil, **17** bbls water in **24** hrs, **0** min. Choke Size **2"**

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): **40,000 Gals. Lease oil w/80,000# sand**

Casing **3050** Tubing **0** Date first new **9-4-62**
Press. **3050** Press. **0** oil run to tanks

Oil Transporter **The Permian Corporation (Trucks)**

Gas Transporter **None**

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8"	330	300
4-1/2"	5029	200
2" EUE	5030	-

Remarks: _____

Pearl Queen Extension.

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

Approved _____, 19 _____

OIL CONSERVATION COMMISSION

By: _____

Title _____

Cabot Corporation
(Company or Operator)

By: **Percy C. O'Quinn**
(Signature)

Title **Dist. Prod. Sup't.**

Send Communications regarding well to:

Name **Percy C. O'Quinn**

Address **Box 4395, Midland, Texas**

Journal of Management Education 30(6)p.789-804

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Lichtenthaler and Whistler (1973).

1. *Pharmaceuticals* (1997) 10, 103-110.

Figure 1. The effect of the concentration of the *Agaricus bisporus* spores on the growth of *Agaricus bisporus* and *Agaricus bisporus* spores on the growth of *Agaricus bisporus*.

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971) using a Shimadzu 1601 UV-Visible Spectrophotometer.

[illegible]

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971) using a Shimadzu UV-160U ultraviolet-visible spectrophotometer.