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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - ~~10/15/57~~ 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
(Place)

August 20, 1962
(Date)

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

Phillips Petroleum Company
(Company or Operator)

(Lease)

Well No. 71, in SE 1/4 NE 1/4,

Unit Lease, Sec. 26, T. 17-S, R. 35-E, NMPM, Vacuum Abo Pool

Lea

County. Date Spudded. 7-16-62

Date Drilling Completed 8-12-62

Please indicate location:

Elevation 3920 DF Total Depth 9100' FBD 9033'

Top Oil/Gas Pay 84.9% Name of Prod. Form. Abo

PRODUCING INTERVAL -

8600 - 8896'

Perforations

Open Hole Depth Casing Shoe Depth Tubing 8622'

OIL WELL TEST -

None prior to acid treatment

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): 224 bbls. oil, 0 bbls. water in 24 hrs, 0 min. Choke Size 16/64"

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): Acidized with 2000 gallons 15% acid

Casing Press. Tubing Press. 4000 Date first new oil run to tanks August 17, 1962

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter Phillips Petroleum Company

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)

By: (Signature)

Title District Chief Clerk

Send Communications regarding well to:

Name Phillips Petroleum Company

Box 2105, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

Title