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PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - ~~WELL~~ ALLOWABLE

Feb 19 1964

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.

Hobbs, New Mexico

February 19, 1964

(Place)

(Date)

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

Phillips Petroleum Company

Santa Fe

Well No. 89, in SW 1/4 NW 1/4,

(Company or Operator)

(Lease)

E, Sec. 26, T. 17-S, R. 35-E, NMPM., Undesignated Pool

Unit Letter

Lea

County. Date Spudded 1-29-64

Date Drilling Completed 2-13-64

Please indicate location:

Elevation 3930' DP Total Depth 6275' FBTD 6242'

Top Oil/Gas Pay 6130' Name of Prod. Form. Paddock

PRODUCING INTERVAL -

6131 - 6171'

Perforations: Depth 6190'

Open Hole Casing Shoe Tubing

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 484 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 1/4"

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 1000 gallons 15% regular

Casing Tubing Date first new Press. 3200# oil run to tanks February 18, 1964

Oil Transporter The Permian Corp.

Gas Transporter Phillips Petroleum Co.

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)

OIL CONSERVATION COMMISSION

By:

Title:

Office Manager

Send Communications regarding well to:

Name: Phillips Petroleum Co.

Box 2130 - Hobbs, New Mexico

Title