NUMBER OF COP .. RECEIVED DISTRIBUTION FILE U. S. G. 1 LAND OFFICE TRANSPORTER GAS PRORATION OFFICE OPERATOR

NEW MEXICO OIL CONSERVATION-COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWAPLE HOBBS OFFICE O. C. C.

New Well Recognition

This form shall be submitted by the operator before an initial allowable will be submitted by the operator before an initial 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 recompletio. The completion date shall be that date in the case of an oil well when new oil is deliv-

red into the stock tanks. Qai mu			Roswell, New Mexico			April 3, 1964 (Date)		
VE ARE I	HEREBY !	REQUEST	ING AN ALLOWABLE	FOR A WEL	L KNOWN A	AS:		•
Shell Co	O11 Co	mpany	State "B" (Lea	ш, We	II No3.	, i n.		
Tieft Li	ster		, T17-S, R3					
			County. Date Spudde	dMarch 5'DR	9,1964 ATO	7100	PBID	6210 ¹
Plea	se indicate	location:	Top Oil/Ges Pay 60					
D	C B	A	PRODUCING INTERVAL -				11/2	7 ¹⁰
 -			Perforations 6076	6080',6085	1,60871,609	00',6091	1,6094 6	098',6099',*
E	F G	H	TOpen Hole	-	Casing Shoe	7097	Tubing	60561
L	K J	I	S Natural Prod. Test:	bbls.oi	l,bb	ls water in	hrs,	Choke min. Size
		^	Test After Acid or Fra	cture Treatmen	t (after recove	ry of volum	e of oil equa	l to volume of Choke
М	N O	P	load oil used): 102	bbls.oil,	70 bbls w	ater in 13	hrs,	min. Size <u>16/6</u> 4
			GAS WELL TEST -					
			.30 Natural Prod. Test:					
Tubing ,Ca	sing and Ge	ementing Rec	ord Method of Testing (pit					
Size	Feet	Sax	Test After Acid or Fra	cture Treatmen	t:	MCF	/Day; Hours f	lowed
8 5/8" 1639 8		800	Choke Size Me					
4 1/2	" 7086	800	Acid or Fracture Treat sand): 250 g. 15%	BDA W/Fe	additive;	1s used, su 2000 g	ch as acid, w 15% NEA	ater, oil, and
2"	6047		PressPress		run to tanks			
			Oil Transporter					
			Gas Transporter	Phillips	etroleum C	ompany_		
Remarks:.	*6	1041, 610	08', 6123', 6124',	6138 6131	6134!			
	······································	7 / /	. A.	/ . *	and the second			
			nformation given above is	true and com	nlete to the bes	t of my kn	owledge.	
I her	eby certify	that the ir	13, 19.6	A.	Shell Oil (ompany		
Approved.		Apri	19.0		(C	company or	Operator)	
c	OIL CONS		ON COMMISSION	Ву:	A. Lower	(Signate	Priginal Sign	ed B y ERY
B y:	1				District Ex	nunications	regarding we	en to.
Title	•	ė.	•••••	Name.	Shell (011 Comp	any	
i 1116			••••					Maxico -