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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PROGRATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE
INDUST. OFFICE D. C. C.

New Well
Recompletion

AUG 5 10 24 AM '64

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.

Roswell, New Mexico August 4, 1964
(Place) (Date)

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

Shell Oil Company State H, Well No. 2, in NW 1/4, SW 1/4,
(Company or Operator) (Lease)

L, Sec. 29, T-17-S, R-35-E, NMPM, Vacuum-Glorieta Pool
Unit Letter

Lee County. Date Spudded 7-13-64 Date Drilling Completed 7-24-64

Please indicate location:

R-35-E

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

Elevation 3980' Total Depth 6250' PBD 6215'

Top Oil/Gas Pay 6102' Name of Prod. Form. Glorieta

PRODUCING INTERVAL - 6102', 6104', 6106', 6109', 6113', 6114',
Perforations 6115', 6119', 6124', 6126', 6130', 6133'

17 Open Hole Depth 6250' Casing Shoe 6250' Depth 6038' 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): 65 bbls. oil, 9 bbls water in 8 hrs, _____ min. Choke Size 17/64"

GAS WELL TEST -

1800' FSL & 660' FWL, Sec. 29 Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8"	1599'	800
4 1/2"	6239'	750
2"	6010'	

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): 250 gallons 15% Spearhead, 1500 gallons 15% NEA

Casing Tubing Date first new Press. 200 oil run to tanks August 1, 1964

Oil Transporter Texas-New Mexico Pipe Line 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____

Shell Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed By R. A. Lowery
By: B. A. LOWERY (Signature)

By: _____

Title: District Exploitation Engineer
Send Communications regarding well to:

Title: _____

Name: Shell Oil Company