## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GRASA) 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.

			HODDS, New Mexico 11-30-64 (Place)
WE ARE	HEREBY F	REQUESTI	NG AN ALLOWABLE FOR A WELL KNOWN AS
Socony	Mobil Of	11 Co., I	nc., State "K", Well No7, in NE
(С. т	ompany or O	perator)	(Lease) //2 A
Uait L	, Sci etter	c	., T. 175 , R. 35E , NMPM., <u>Undesignated</u> Pool
	Lea		County. Date Spudded. <u>11-5-64</u> Date Drilling Completed <u>11-23-64</u>
Please indicate location:			Elevation3978'Total Depth6300 'PBTD6251'
			Top Oil/Gas Pay 6048Name of Prod. FormGlorieta
D	C B	A	PRODUCING INTERVAL -
E	FG	H	Perforations <u>6048 - 6076</u>
-	- Q	п	Open HoleCasing Shoe6298Tubing6238
L	K J	I .660	OIL WELL TEST -
		.660	Choke
M	N O	2080 <sup>1</sup>	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Flowed load oil used): 244 bbls.oil, 0 bbls water in 24 hrs,min. Size 20/64
<u> </u>			Natural Prod. Testy
fubing Ca	sing and Cem	anting Recor	Natural Prod. Test:MCF/Day; Hours flowedChoke Size
Stor		Sax	Monor of resting (prot, back pressure, etc.):
8-5/8	1572	900	Test After Acid or Fracture Treatment:MCF/Day; Hours flowed Choke SizeMethod of Testing:
5-1/2	6298	1800	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 1000 Gals 15% NE Acid + 25 RCN Ball sealers sand):
2	6238		Casing Tubing Date first new PressPress. 200 oil run to tanks <u>11-26-64</u>
			Cil Transporter Magnolia Pipe Line Co.
		<u> </u>	Gas Transporter Phillips Pet. Co
Remarks :	Gty.	39.0 @ 6	50° GOR 537
I herei	by certify th	at the info	mation given above is true and complete to the best of my knowledge.
61			COMMISSION By: A MC Musel
	Г		(Signature)
By:			Title Group Supervisor
Title	2.00 •		Send Communications regarding well to:
			Name_Socony Mobil Oil Company, Inc

Address P. O. Box 1800, Hobbs, N.M.