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NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

10633 OFFICE OF O.C.C.

New Well
Recompletion

JUN 15 8 39 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 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.

Midland, Texas

6-8-64

(Place)

(Date)

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

D. W. St. Clair

Superior-Federal

Well No. 1, in SE 1/4 NW 1/4,

(Company or Operator)

(Lease)

F

Sec. 25

T-19-S

R-34-E

NMPM,

Pearl Queen

Pool

Unit Letter

Lea

County. Date Spudded 4-20-64

Date Drilling Completed 5-2-64

Elevation 3771 KB

Total Depth 5150

FETD 5121

Please indicate location:

Top Oil/Gas Pay 5042

Name of Prod. Form. Queen Sand

PRODUCING INTERVAL -

Perforations 5042, 5044, 5057, 5059

Open Hole Depth 5150

Depth Tubing 5050

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 33 bbls. oil, 97 bbls water in 24 hrs, 0 min. Size 2" Choke

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): Frac w/12,000 gal. oil, 1 1/2# Sand/Gal.

Casing Press. 25# Tubing Press. - Date first new oil run to tanks 6-3-64

Oil Transporter The Permian Corporation

Gas Transporter

Remarks: New Well - 1st. Filing

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: 1964, 19

D. W. St. Clair

(Company or Operator)

OIL CONSERVATION COMMISSION

By: George Van Huse

(Signature)

Title Agent

Send Communications regarding well to:

D. W. St. Clair

Name 501 First Nat'l Bank Bldg.

Midland, Texas

By: [Signature]

Title