

REQUEST FOR (OIL) - (GAS) 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.

Hobbs, New Mexico December 8, 1959
(Place) (Date)

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

Sinclair Oil & Gas Company State Lea 886, Well No. 1, in SE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)

F, Sec. 16, T. 20S, R. 33E, NMPM, Wildcat Pool
Unit Letter

Lea

Please indicate location:

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

County. Date Spudded 11-13-59 Date Drilling Completed 11-29-59

Elevation 3537 Total Depth 3325 FBTD 3315

Top Oil/Gas Pay 2946 Name of Prod. Form. Yates

PRODUCING INTERVAL -

Perforations 3146-62, 3168-76, 3195-98, 3220-3232

Open Hole _____ Depth _____ Casing Shoe 3325 Depth _____ Tubing 3212

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 Choke
load oil used): 293 bbls. oil, 0 bbls water in 12 hrs, 0 min. Size Swab

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): 500 gallons breakdown acid on perfs 3220-3232

Casing _____ Tubing _____ Date first new _____
Press. Packer Press. Zero oil run to tanks December 4, 1959

Oil Transporter Cactus Petroleum Company

Gas Transporter None - no connector

Remarks: Quiberson packer set at 3212 & well potentialled & producing from perforations 3220-3232.

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

Approved _____, 19 _____

Sinclair Oil & Gas Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]
(Signature)

By: [Signature]

Title Asst. Dist. Supt.
Send Communications regarding well to:

Title _____

Name L.M. Sellers

Orig & 3cc: OCG; cc: State Land Office
co: HFD, OGS, File

Address 520 E Broadway, Hobbs, N.M.