

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.

Artesia, New Mexico

10/26/59

(Place)

(Date)

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

T.J. Sivley

Fed. Silver

Well No. 3

SE

SW

(Company or Operator)

(Lease)

N

Sec. 28

T. 20S

R. 34E

NMPM,

Lynah

Pool

Unit Letter

Lea

County. Date Spudded

9/14/59

Date Drilling Completed

10/18/59

Please indicate location:

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

Elevation 3721

Total Depth 3693

PBTD

Top Oil/Gas Pay 3687

Name of Prod. Form.

Yates Reef

PRODUCING INTERVAL -

Perforations

Open Hole 3659-3693

Depth

Casing Shoe 3659

Depth

Tubing 3661

OIL WELL TEST -

Natural Prod. Test: 180 bbls. oil, 0 bbls water in 24 hrs, min. Size Pump

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): bbls. oil, bbls water in hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: TSTM 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):

Casing Press. 0 Tubing Press. 0 Date first new oil run to tanks 10/23/59

Oil Transporter Cactus Petroleum, Inc.,

Gas Transporter No Gas Production. Too Small to Measure

Remarks:

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

Approved: 001 21 1959, 19

T.J. Sivley

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature] Engineer District 1

Title

By: [Signature] (Signature)

Title Operator

Send Communications regarding well to:

Name T.J. Sivley, Box 1208

Address Artesia, New Mexico