

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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 May 2, 1960
(Place) (Date)

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

Gulf Oil Corporation Lea State "AP" Well No. 2, in NE $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)
I, Sec. 30, T. 19-S, R. 35-E, NMPM, Pearl Queen Pool
Unit Letter

Lea County. Date Spudded 4-6-60 Date Drilling Completed 4-19-60
Please indicate location: Elevation 3744' Total Depth 1995' PBTD 1985'

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

Top Oil/Water Pay 1826' Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 1826-20', 1922-24' & 1967-69'
Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing 1952'

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): 86 bbls. oil, 5 bbls water in 2 1/2 hrs, _____ min. Size 2" 1/2

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): 15,000 gals refined oil, 1/40% Mark II Adovite & 1-2# SPB.

Casing 3100- Tubing _____ Date first new _____
Press. 3800# Press. _____ oil run to tanks May 1, 1960

Oil Transporter Permian Oil Co.

Gas Transporter Warren Petroleum Corp.

Remarks: _____

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

Approved _____, 19 _____ Gulf Oil Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature] Title: Area Production Manager

Title _____ Send Communications regarding well to:

Name: Gulf Oil Corporation

Address: Box 2167, Hobbs, N. Mex.