

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 June 14, 1960
(Place) (Date)

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

Gulf Oil Corporation Lea State "BO" Well No. 8, in SE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)
H Sec. 33 T. 19-S R. 35-E NMPM., Pearl Queen Pool
Unit Letter

Lea County. Date Spudded 5-8-60 Date Drilling Completed 5-21-60
Elevation 3691' Total Depth 5012' PBD 5000'

Please indicate location:

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

1980' FML & 660' FML

Tubing, Casing and Cementing Record
Size Feet Sak

<u>8-5/8"</u>	<u>141'</u>	<u>100</u>
<u>4-1/2"</u>	<u>5005'</u>	<u>250</u>
<u>2-3/8"</u>	<u>4915'</u>	<u>--</u>

Top Oil/~~Gas~~ Pay 4750' Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 4750-52', 4890-92', 4949-51' & 4960-62'
Open Hole Depth 5012' Casing Shoe 4915' Depth 4915'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 3 1/2 bbls. oil, 4 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): 16,000 gals ref oil, 1/404 Mark II & 1-3# SPQ

Casing 2800' Tubing 4900' Date first new June 8, 1960
Press. 4900' Press. 4900' oil run to tanks

Oil Transporter Shell Pipeline Corp.

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]
(Signature)

Title Area Petroleum Engineer
Send Communications regarding well to:

Name Gulf Oil Corporation

Address Box 2167, Hobbs, New Mexico

Title _____

By: [Signature]