

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico
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 QUADRUPPLICATE 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico
(Place)

May 14, 1956
(Date)

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

Stanolind Oil and Gas Co. O. J. Gillelly B R/A Well No. 7, in NE $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

E, Sec. 22, T. 20-S, R. 37-E, NMPM, Eumont Pool
(Unit)

Lea County. Date Spudded 12-20-55, Date Completed 3-29-56

Please indicate location:

	X		

Elevation 3529 Total Depth 3658 P.B.

Top oil/gas pay 2640 Name of Prod. Form Eumont

Casing Perforations: * or

Depth to Casing shoe of Prod. String 3348

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot Sand-Oil free BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential 2718 MCFPD

Size choke in inches 28/64

Date first oil run to tanks or gas to Transmission system:

Transporter taking Oil or Gas: Permian Basin Pipeline Co.

NE $\frac{1}{4}$ of SW $\frac{1}{4}$ Sec. 22

Casing and Cementing Record

Size Feet Sax

<u>8 5/8"</u>	<u>308'</u>	<u>225</u>
<u>5 1/2"</u>	<u>3348'</u>	<u>850</u>

Remarks: #2640-2658, 2669-2686, 2693-2706, 2750-2758, 2772-2783, 2836-2856, 2864-2874, 2881-2891, 2953-2972, 2995-3005, 3077-3082, 3138-3149, 3193-3212, 3230-3239, 3253-3266 w/2 shots per foot.

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

Approved SEP 20 1956, 19

OIL CONSERVATION COMMISSION

By: [Signature]

Title [Signature]

Stanolind Oil and Gas Company
(Company or Operator)

By: [Signature]
(Signature)

Title Field Superintendent
Send Communications regarding well to:

Name

Address