

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

5-7-57

(Place)

(Date)

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

Sunray Mid-Continent Oil Co. Linam Hardy Unit, Well No. 1, in NE $\frac{1}{4}$ NE $\frac{1}{4}$,

(Company or Operator)

(Lease)

A

29

T 21-S

R 37-E

NMPM, Blinebry Gas

Pool

(Unit)

Lea

County. Date Spudded 4-8-57

Date Completed 4-27-57

Please indicate location:

			x

Elevation 3470 Total Depth 7941 P.B. 6965

Top oil/gas pay 5600 Name of Prod. Form Blinebry Gas

Casing Perforations: 5600-5650 or

Depth to Casing shoe of Prod. String 7382

Natural Prod. Test 168 BOPD

based on 42 bbls. Oil in 6 Hrs. Mins.

Test after acid or shot ~~XXXX~~ 5,380 MCFD BOPD

Based on XXXX bbls. Oil in XXXX Hrs. Mins.

Gas Well Potential 5,380 MCFD

Size choke in inches Open flow potential

Date first oil run to tanks or gas to Transmission system: 5-7-57

Transporter taking ~~Oil~~ or Gas: Permian Basin Pipe Line Co.

Casing and Cementing Record

Size Feet Sax

<u>13 3/8</u>	<u>315</u>	<u>300</u>
<u>9 5/8</u>	<u>2850</u>	<u>1800</u>
<u>5 1/2</u>	<u>7382</u>	<u>500</u>

Remarks: Treated well during completion with 8,000 gal. acid and fraced with 20,000 gal. oil and 20,000# sand.

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

Approved _____, 19____

Sunray Mid-Continent Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]

(Signature)

Title Hobbs Area Superintendent

Send Communications regarding well to:

Name Sunray Mid-Continent Oil Company

Address Box 128 - Hobbs, New Mexico

By: _____

Title _____