

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 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

December 11, 1959

(Place)

(Date)

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

Gulf Oil Corporation

Bunice King

Well No. 24

SW

NW

(Company or Operator)

(Lease)

E

Sec. 28

T 21-S

R. 37-E

NMPM.

Wanta Abo

Pool

Unit Letter

Lea

County. Date Spudded

Date Recompleted 12-11-59

Date Drilling Completed

Please indicate location:

Elevation 3470'

Total Depth 8022'

FBTD 7293'

Top Oil/Gas Pay 7147'

Name of Prod. Form. Abo

PRODUCING INTERVAL -

Perforations 7147-57', 7173-78', 7183-93', 7200-06' & 7210-20'.

Open Hole

Depth

Depth

Casing Shoe

Tubing

6951'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 200 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 18/64"

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): 6,000 gals 15% NE acid with Dowell's XWL additive

Casing Tubing 4000- Date first new

Press. 2800# Press. all run to tanks

December 1, 1959

Oil Transporter Shell Pipeline Corporation

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: 12-11-59, 19

Gulf Oil Corporation

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

By: [Signature]

Title:

Area Production Supt.

Send Communications regarding well to:

Title: [Signature]

Name:

Gulf Oil Corporation

Address:

Box 2167, Hobbs, N. M.