

REQUEST FOR (OIL) - (GAS) ALLOWABLE **Dual** 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 November 18, 1958
(Place) (Date)

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

Gulf Oil Corporation J. F. Janda (NCT-F), Well No. 3, in SE 1/4 NW 1/4,
(Company or Operator) (Lease)
F, Sec. 4, T. 22-S, R. 36-E, NMPM, Jalmat Pool
Unit Letter

Lea

Please indicate location:

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

County. Date Spudded Date Drilling Completed
Elevation 3584' Total Depth 3900' FRTD -

Top Oil ~~Gas~~ Pay 3200' Name of Prod. Form. Yates

PRODUCING INTERVAL -

Perforations 3200-3650'

Open Hole Depth Depth
Casing Shoe Tubing

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): 44 bbls. oil, 0 bbls water in 24 hrs, - min. Size 21/64"

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8"	1602'	750
5-1/2"	3793'	975
2-3/8"	3878'	-

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): 7500 gals lse oil, 1# spg (3302-3400'), 10,000 gals 1# spg (3200-3346')
Casing Tubing Date first new
Press. 500% App Press. 3300# oil run to tanks 2-7-56

Oil Transporter Shell Pipeline Corp.

Gas Transporter Permian Basin Pipeline Co.

Remarks: Please make allowable effective November 1, 1958.

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)

By:

Title Asst. Area Production Supt.
Send Communications regarding well to:

Title

Name Gulf Oil Corporation
Box 2167, Hobbs, N. M.