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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

December 22, 1960

(Place)

(Date)

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

Sinclair Oil & Gas Company

State 157 "D"

Well No. 7, in SE 1/4 SW 1/4,

(Company or Operator)

(Lease)

N, Sec. 12, T. 22S, R. 36E, NMPM, Summit Gas Pool

Unit Letter

Loc.

County. Date Spudded. Date Drilling Completed

Please indicate location:

Elevation 3482 Total Depth 3761 PBD 3700

Top Oil/Gas Pay 2920 Name of Prod. Form. Seven Rivers & Queen

PRODUCING INTERVAL - 3142-50, 3190-3202, 3220-30, 3243-52, 3274-79,

Perforations 3328-37, 3377-3410, 3458-67, 3500-60

Open Hole Depth Casing Shoe Depth Tubing 3120

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 load oil used): bbls. oil, bbls water in hrs, min. Size Choke

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: 2986 MCF/Day; Hours flowed 24

Choke Size 37/64" Method of Testing: 4 Point Back Pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 750 gals mud acid.

Casing Press. 370 Tubing Press. 700 Date first new oil run to tanks

Oil Transporter Dry Gas - no distillate produced

Gas Transporter El Paso Natural Gas Co.

Remarks:

Gas connected: 12-22-60

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

Approved: 19

Sinclair Oil & Gas Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)

Title Asst. Dist. Supt.

Send Communications regarding well to:

E.R. Wood

Name

Address 520 E Broadway, Hobbs, N.M.

Orig: 3cc: OCC; cc: State Land Office, cc: NFD, JM