HUMBER OF	COP 4 4E							(Form C-104) .avised 7/1/57
PILE								
				REQUEST FOR	(OIL) - (Gay	CO) ALLENDER	AFLE	
TRANSPORTER BAB PRORATION OFFICE OFFRATOR					HCBBS C	DEFICE OCC		New Well Recompletions
Form C- able will month of	-104 is 1 be as of corr	to be subn signed effe	nitted in Q ctive 7:00 recompleti	the operator before an initial UADRUPLICATE to the sar A.M. on date of completion o: The completion date shi be reported on 15.025 psia at	ne Detrict Office or recompletion, all be that date ir	e to Mhich For 29C-1 previded this form in the case of an oil w	101 was sei is filed du	nt. The allow- uring calendar
	to the	SURE Calles	, yas mus		Hobbs, New Me (Place)	xiço	4-	(Date)
1	The (Dhio Oil	Company	G AN ALLOWABLE FOR St. McDonald a/c 1-H (Lease)	A WELL KNO 3, Well No	WN AS: 30 , in SE	·	SW
(Company or Operator) (Lease) N., Sec. 24., T. 22 S, R. 36 E, NMPM., South Eunice Po								
91-4	• 1.41.19			County Date Spudded 3.	-16-62	Date Drilling Compl	leted	3-211-62
		indicate lo		Elevation 3430 GL	Total D	epth3010*	PBTD	5101
				Top Oil/Gas Pay3698	Name of	Prcd. Form	Queen	
D	C	B	A	PRODUCING INTERVAL -	2726-27 3	756-581		
E	F	G	H	Perforations <u>3698-99</u> Open Hole		120-20	Depth	
				Open Hole	Casing	Shoe	_lubing	
L	K	J	I	OIL_WELL_TEST - Natural Prod. Test:	_bbls.oil,	bbls water in	<u></u> hrs,	Choke min. Size
				Test After Acid or Fracture	Treatment (after	recovery of volume o	f oil equa	1 to volume of
M N x		0	P	load oil used): <u>38</u> _bbl	s,cil, <u>0</u>	bbls water in <u>3</u> 1	hrs,	nin. Size 19/61
				GAS_WELL_TEST - Natural Prod. Test:MCF/Day; Hours flowedChoke Size				
(FOUTAGE)								
Tubing ,Casing and Comenting Record								
Size Feet Sax				Test After Acid or Fracture				lowed
8.5/	/8	1,22	225	Choke SizeMethod c				
41/	12	3809	1050	Acid or Fracture Treatment (sand): Treated thru 42	Sive amounts of m csg. in Quee	n w/15000 leas	e oil, a	22500# sand
				Casing Tubing Press. Pkr Press. 2	Date first n	ew anks 11-1-62		
2 3/	/8	3758		Oil Transporter Texas				
Remark	. R	equest t	op 40 ac	re allowable Dist:	NMOCC	D.	V. Kitle	ey
					an at Dab	"onde ".	O. Webb	
	••••••				J. A. Grime	5. J.	B. Bail	ey
J. A. Grimes J. B. Bailey I hereby certify that the information given above is true and complete to the best of my knowledge.								
I hereby certify that the information given above is true and complete to the Unit THE OHIO OIL COMPANY Approved								
(Company or Operator)								
OIL CONSERVATION COMMISSION By: By: (Signature)								**
D.	۰ منبعہ معمد	7.2	1 1	12	Title	Superintenden		
By: Send Communications regarding well to:								
Title	•••••				Name	The Uhio Oil	Company	
					Address	Box 2107. Hob	bs. New	Mexico