

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

Roswell, New Mexico 10-23-57

(Place)

(Date)

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

Bill A. Shelton Gulf Orcutt, Well No. 1, in NW  $\frac{1}{4}$  NE  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

B Unit Lea, Sec. 25, T. 21, R. 35, NMPM, Eumont Pool

Unit Letter

County Lea Date Spudded 9-12-57 Date Drilling Completed 10-1-57

Please indicate location:

D	C	B <sub>x</sub>	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 3622 Total Depth 3997 PBD

Top Oil/Gas Pay 3808 Name of Prod. Form. Yates-7 Rivers

PRODUCING INTERVAL -

Perforations 3808-17, 3879-86, 3904-10

Open Hole none Depth 3995 Casing Shoe 3770 Depth 3770 Tubing

OIL WELL TEST -

Natural Prod. Test: none 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): 165 bbls. oil, 0 bbls water in 24 hrs, \_\_\_\_\_ min. Size 32/64

GAS WELL TEST -

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

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
8-5/8	295	125
5 1/2	3995	150

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): 10,000 gal. 15% crude, 10,000# sand

Casing 350# Tubing 200# Date first new 10-3-57  
Press. 350# Press. 200# oil run to tanks

Oil Transporter Shell Oil Company trucks

Gas Transporter \_\_\_\_\_

Remarks: \_\_\_\_\_

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

Approved \_\_\_\_\_, 19\_\_\_\_

Bill A. Shelton  
(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: Virginia Perrin Virginia Perrin  
(Signature)

By: \_\_\_\_\_

Title Agent  
Send Communications regarding well to:

Title \_\_\_\_\_

Name Shelton-Warren Oil Producers

Address 734 Petr. Bldg., Roswell, N.M.