

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

July 3, 1958

(Place)

(Date)

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

Gulf Oil Corporation W. A. Ramsay "A", Well No. 40, in NE 1/4 NE 1/4,

(Company or Operator)

(Lease)

A, Sec. 27, T. 21, R. 36, NMPM, Eumont Pool

Unit Letter

Lea

County Date Spudded 5-17-58

Date Drilling Completed

5-28-58

Please indicate location:

Elevation 3550'

Total Depth 3920'

FBTD 3915'

Top Oil/Gas Pay 3738'

Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 3738-3910'

Open Hole -

Depth

Casing Shoe 3919'

Depth

Tubing 3904'

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): 63 bbls, oil, 2 bbls water in 24 hrs, 0 min. Size 3/4" 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: 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): 500 gal Mud Acid; 40,000 gal. lse oil with 1/40# Adomite & 1# sand per gal. Casing Tubing Date first new Press. 760# Press. 290# oil run to tanks 7-1-58

Oil Transporter Shell Pipe Line Corporation

Gas Transporter Warren Petroleum Corporation

Remarks: It is requested this well be placed on proration schedule effective 7-1-58.

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)

By:

(Signature)

OIL CONSERVATION COMMISSION

By:

Title: Area Production Supt.

Send Communications regarding well to:

Title:

Name: Gulf Oil Corporation

Address: Box 2167 - Hobbs, New Mexico