OIL CONSERVATION COMMISSION

HOBBS, NEW MEXICO

April 14, 1961



Shell Oil Co. Box 1858 Roswell, New Mexico

Gentlemen:

We are returning the Packer Leakage Test for your State Sec. 2 No. 4 located in Unit U of Section 2, T-21-S, R-37-E in order that you may show the gas volume produced during the Tubb flow period.

Yours very truly,

OIL CONSERVATION COMMISSION

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Eric F. Engbrecht Engineer, District 1

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DIL CONSERVATION COMMISSION

HOBSE, NEW MEXICO



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NEW Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

Recompletion

REQUEST FOR (OIL) - (CLASC ALLOWABLE

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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.

i into the stock tarks. Was it		•	ust be reported on rotors pairs		Roswell, New Mexico			March 21, 1961	
	·							(Date)	
ell 0	1 Compa	ny	State (Se	c. Z)	Well No	in	SW	SW	
(Company or Operator) U Sec. 2		itor) 2	T21-S R3	7-B NN	IPM.,	Drink	ard	Pool	
t Latter			Opera County, Date Sumb	tion Star M <u>3-10</u> -	ted Dat	Uperations Co	n pleted	3-18-61	
Please in R-1	dicate loc	ation :	Elevation 346	65361	Total Depth	6710'	Drinkard		
K.	BCX J	I I	PRODUCING INTERVAL -					· .	
XX N	XX . 0	щ Р	Perforations Open Hole6536'	- 6718'	Depth Casing Shoe	6718'	Depth Tubing	64631	
XXX	XX	AX O	2 DIL WELL TEST - S Natural Prod. Test:	81 _bbls,	oil, O.4	bbls water in	211 hrs,	Choke6/	
故	XX.	Ŕ	Test After Acid or Fr	acture Treatm	ent (after reco	very of volume	of oil equa	l to volume of Choke	
V	W	Å	GAS WELL TEST -		•				
FSL &	610' FW	L, Sec	• Natural Prod. Test:		MCF/Day; Ho	ours flowed	Choke S	i ze	
,Casing	and Cemen	ting Reco	rd Method of Testing (pi	tot, back pro	essure, etc.):				
te	Feet	Sax	Test After Acid or Fr	acture Treat	ment:	MCF/	Day; Hours f	lowed	
/8=	216	250	Choke SizeN	lethod of Tes	ting:				
/8=	31.39	1700		tment (G ive a	mounts of mater	ials used, suc	h as acid, w	ater, oil, and	
/2"	6525	500	Casing Tubi			Marci	1 18, 196	1	
	61.62		Oil Transporter	Shell Pir	e Line Cor	erstion EFFE	CTIVE TAN	JITARY 37. 1077	
			Gas Transporter	Skelly 01	T COMP MY	SKEI	LY OIL CO	DMPANY MERG	
<u>ks</u> :	••••••	·	19.11.01	2	et. L	INT	GETTY	DIL COMPANY.	
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hereby c	ertify tha	t the inf	ormation given above is	true and co	mplete to the b	est of my kno	wledge.		
			<u> </u>		SUD	(Company or C	perator)		
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			COMMISSION	Title	District	(Signatur (Signatur Exploitati nmunications	A. LOWER	er	
	In the second se	iell 011 Company or Opera U , Sec Ister Lesa Please indicate loc R-1/-E IX BX K J X JX N O XX XX V W FSL & 610 * FW , Casing and Cement re Feet /8* 31.39 /2* 6525 6463	1 Oil Company (Company or Operator) 2 Sec. 2 Lease Icate Please indicate location: Icate IX IX IX S R Q X IX IX FSL & 610* FWL, Sec Sec , Casing and Comenting Recoorder Sax /8* 216 250 /8* 3139 1700 /2* 6525 500 61463 Sax	1011 Company State (Set) (Company or Operator) (Later (Set)) (Later (Set)) Set	E HEREBY REQUESTING AN ALLOWABLE FOR A Williell Oil Company State (Sec. 2) (Company or Operator) U Sec. Sec. T21-S Real County. Date 2 Deration State It State Deration State It State	(Place) E HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN ell Oil Company or Operator) Company or Operator) Sec	(Place) E HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: soll 011 Company (Company or Operator) U , in	(Place) (Place) (Place) (Company or Operator) Less Depression State (Sec. 2) Well No	