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NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-10)  
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 QUADRUPPLICATE 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.

**TEKACO Inc., P.O. Box 352, Midland, Texas** **January 18, 1961**  
(Place) (Date)

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

**TEKACO Inc.**, **J. C. Ertlack**, Well No. **1**, in **NW**  $\frac{1}{4}$  **SW**  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)  
**1**, Sec. **3**, T. **21-S**, R. **37-E**, NMPM, **Tubb Gas** Pool  
Unit Letter

**Lea** County. Date Spudded **1-18-50** Date Drilling Completed **1-26-50**

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
X			
M	N	O	P

Elevation **3459'** Total Depth **6690'** PBD **6615'**

Top ~~3459'~~ Pay **6242'** Name of Prod. Form. **Tubb**

PRODUCING INTERVAL - **6307'-6319', 6327'-6331',**  
Perforations **6242'-6248', 6260'-6265', and 6279'-6294'**

Open Hole **None** Depth **6690'** Depth **6240'**  
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Choke Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8"	250	300
8-5/8"	2900	1800
5-1/2"	6690	600
2-1/16"	6240	

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: **532** MCF/Day; Hours flowed **24**

Choke Size **18/64** Method of Testing: **Back pressure**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **See remarks**

Casing Tubing Date first new  
Press. **1800** Press. **1100** oil run to tanks **January 12, 1961**

Oil Transporter **Texas-New Mexico Pipe Line** **EFFECTIVE JANUARY 31, 1977,**

Gas Transporter **Shelly Oil Company** **SKELLY OIL COMPANY MERGED**

Remarks: **Perforate 5-1/2" O.D. casing 6242' to 6248', 6260' to 6265', 6279' to 6294', 6307' to 6319', and 6327' to 6331'. Acidize perfs with 1000 gals 15% ISX HCl at 2.5 BPM. Free perfs with 20,000 gals refined oil and 20,000 lbs sand at 10.4 BPM.**

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

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

**TEKACO Inc.**  
(Company or Operator)

OIL CONSERVATION COMMISSION

By: **W. B. Hubbard**  
(Signature)

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

Title: **Assistant District Superintendent**  
Send Communications regarding well to:

Title \_\_\_\_\_

Name: **W. B. Hubbard**

Address: **P.O. Box 352, Midland, Texas**