

# REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE

~~RECOMPLETION~~  
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  
(Place)

August 18, 1958  
(Date)

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

Humble Oil & Refining Company, Well No. 9, in NE 1/4 SW 1/4,  
(Company or Operator) (Lease)

K, Sec. 10, T. 21-S, R. 37-E, NMPM., Hara Pool  
Unit Letter  
Lea

Please indicate location:

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

County. Date Spudded. Date Drilling Completed  
Elevation 3464 DF Total Depth 8,240 FBTD 8,240  
Top Oil/Gas Pay 7,974 Name of Prod. Form. Connell

## PRODUCING INTERVAL -

Perforations 7,974-8,004  
Open Hole Depth Casing Shoe 8,240 Depth Tubing 8,045

## OIL WELL TEST -

Natural Prod. Test: 74 bbls. oil, bbls water in 24 hrs, min. 64-10"SPM  
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

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):

Casing Tubing Date first new  
Press. Press. oil run to tanks 8-11-58

Oil Transporter Gulf Refining Company

Gas Transporter Skelly Oil Company

Remarks: Request 72 bbl. allowable due to New Mexico State Well being in same unit with a  
10 bbl. allow.

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

Approved, 19, Humble Oil & Refining Company  
(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]  
Title

By: [Signature]  
(Signature)

Title: Agent  
Send Communications regarding well to:

Name: Humble Oil & Refining Company

Address: Box 2347 - Hobbs, New Mexico  
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