

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - ~~RECOMPLETION~~ ALLOWABLE

Dual ~~Recompletion~~
New Well

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

December 1961

(Place)

(Date)

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

Pan American Petroleum Corporation State "G" Tract 12, Well No. **7**, in **NW 1/4 NW 1/4**,

(Company or Operator)

D

Sec. **16**

T. **21 S**

R. **37 E**

NMPM.

Blinebry

Pool

Unit Letter

Lea

County. Date **11-10-61**

Date Drilling Completed **12-20-61**

Elevation **5499'**

Total Depth **6690'**

PBTD

Top Oil ~~Pay~~ **5836'**

Name of Prod. Form. **Blinebry**

PRODUCING INTERVAL -

Perforations **5836-5972'**

Open Hole

Depth Casing Shoe **6629'**

Depth Tubing **5825'**

OIL WELL TEST -

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

Test After Acid ~~and~~ or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **15** bbls. oil, **30** bbls water in **24** hrs, _____ min. Size **Pump** 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): **24,000 gal oil; 48000# sand; 3000 gal acid.**

Casing **-** Tubing **Pump** Date first new **12-3-61 (Testing)**
Press. **-** Press. **-** oil run to tanks

Oil Transporter **Magnolia Pipe Line Company**

Gas Transporter **Warren Petroleum Corporation**

Remarks:

Well Shut in pending dual completion application approval.

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

Pan American Petroleum Corporation

Approved _____, 19_____

(Company or Operator)

Original Signed by:

V. E. STALEY

By: _____

(Signature)

OIL CONSERVATION COMMISSION

By: _____

Title **Area Superintendent**

Send Communications regarding well to:

V. E. Staley

Name _____

Box 68 - Hobbs, New Mexico

Address _____

Title _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8"	328	300
9 5/8"	2898	1100
5 1/2"	6629	800
2 1/16"	5825	

660' FROM Lines