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NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/62

REQUEST FOR (OIL) - (GAS) ALLOWABLE

QUADRUPPLICATE

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-104 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

2/19/63

(Place)

(Date)

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

UNIT M

Me-Tex Supply Company

Wallace-State

, Well No. **5**, in **1/4** in **1/4**,

(Company or Operator)

(Lease)

M

3

T 21S

R 36E

NMPM,

Undesignated

Pool

Unit Letter

Lea

County. Date Spudded **1/16/63**

Date Drilling Completed **2/7/63**

Please indicate location:

Elevation **3562 DF**

Total Depth **6307**

PBTD **6286**

Top Oil/Gas Pay **5862**

Name of Prod. Form. **Elinebry**

PRODUCING INTERVAL -

Perforations **5862 - 5882, 5890 - 5906, 5910-14**

Open Hole _____ Depth **6306** Depth **5859**
Casing Shoe _____ Tubing _____

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): **278** bbls. oil, **No** bbls water in **24** hrs, _____ min. Size **24/64** 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): **1500 gals NEA LST**

Casing _____ Tubing **400** Date first new **February 13, 1963**
Press. **Packer** Press. _____ oil run to tanks

Oil Transporter **Permian Corp.**

Gas Transporter **Waiting on Connection**

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	1326	350
5 1/2	6307	600
2	5859	

Remarks:

40 20.00 11/1 (Center Blue) Est

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

Approved: _____, 19____

ME-TEX SUPPLY COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *[Signature]*

By: *R. F. Montgomery*

RANDALL F. MONTGOMERY

Title **GEOLOGIST**

Send Communications regarding well to:

Title _____

Name **ME-TEX SUPPLY COMPANY**

