

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
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 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.

Roswell, New Mexico 11-16-64
(Place) (Date)

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

The Atlantic Refining Company State L, Well No. 6, in Sec. 1/4, 1/4,
(Company or Operator) (Lease)

E, Sec. 11, T. 21S, R. 36E, NMPM., Undesignated Blinbry 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 8-17-64 Date Drilling Completed 9-14-64
Elevation 3576 Total Depth 6200 PBTD 6164

Top Oil/Water Pay 5760 Name of Prod. Form. Blinbry

PRODUCING INTERVAL -

Perforations 5815-23; 5827-45; 5836-64 & 5760-85

Open Hole None Depth Casing Shoe 6199 Depth Tubing 5671

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 load oil used): 29 bbls. oil, 3 bbls water in hrs, min. Choke Size 32/64

GAS WELL TEST -

330 FNL & 1650 FNL Sec. 11 Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

| Size | Feet | S&W |
|-------|---------|-----|
| 8-5/8 | 1300.95 | 660 |
| 5-1/2 | 6188.02 | 473 |
| 2-3/8 | 5661.55 | |

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): *See Below

Casing Tubing Date first new Press. Packer Press. 0-300 oil run to tanks 11/14/64

Oil Transporter The Permian Corp.

Gas Transporter Vented Temporarily

Remarks: * Treated w/1500 gal. mud acid, 3000 gal. regular acid & 70,000 gal. lease crude & 22,000 gal. 20/40 Sd. in three stages.

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

Approved: 11-16-64, 19

The Atlantic Refining Company
(Company or Operator)

By: O. D. Bretches O. D. Bretches
(Signature)

OIL CONSERVATION COMMISSION

By:

Title District Drilling Supervisor
Send Communications regarding well to:

Title

Name The Atlantic Refining Company

Address Box 1978, Roswell, New Mexico

THE ATLANTIC REFINING COMPANY
P. O. Box 1978 - Roswell, New Mexico

STATE "L" #6

September 22, 1964

LEA COUNTY, NEW MEXICO

DEVIATION SURVEY

| | | |
|------------|---|------|
| 3/4 degree | @ | 976' |
| 1 1/4 | @ | 1300 |
| 1 3/4 | @ | 2147 |
| 1 1/4 | @ | 2350 |
| 1 | @ | 2750 |
| 1 1/4 | @ | 2980 |
| 1 1/4 | @ | 3450 |
| 1 1/4 | @ | 3600 |
| 1 1/4 | @ | 4215 |
| 1 3/4 | @ | 4752 |
| 2 | @ | 5251 |
| 1 | @ | 5638 |
| 1/4 | @ | 6200 |

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Signature

CONVERLIN DRILLING, INC.
Company

OPERATOR AFFIDAVIT:

Before me, the undersigned authority, on this day, personally appeared

O. D. Bretches, known to me to be the person whose name is subscribed hereto, who after being duly sworn, on oath states that he is acting at the direction and on behalf of the operator of the well identified in this instrument, and that such well was not intentionally deviated from the vertical whatsoever.

[Signature] Dist. Drilling
Signature and Title Supervisor

SWORN and SUBSCRIBED to before me, this the 16th day of September, 1964.
November

My Commission Expires:

[Signature]
Notary Public in and for Chaves County,
New Mexico.

MY COMMISSION EXPIRES MAY 23, 1968

15 44

1944-1945

| Year | Population | Population |
|------|------------|------------|
| 1950 | 1,000,000 | 1,000,000 |
| 1955 | 1,100,000 | 1,100,000 |
| 1960 | 1,200,000 | 1,200,000 |
| 1965 | 1,300,000 | 1,300,000 |
| 1970 | 1,400,000 | 1,400,000 |
| 1975 | 1,500,000 | 1,500,000 |
| 1980 | 1,600,000 | 1,600,000 |
| 1985 | 1,700,000 | 1,700,000 |
| 1990 | 1,800,000 | 1,800,000 |
| 1995 | 1,900,000 | 1,900,000 |
| 2000 | 2,000,000 | 2,000,000 |
| 2005 | 2,100,000 | 2,100,000 |
| 2010 | 2,200,000 | 2,200,000 |
| 2015 | 2,300,000 | 2,300,000 |
| 2020 | 2,400,000 | 2,400,000 |

1. I hereby certify that I have personal knowledge of the facts and figures placed on this form and that such information is true and complete.

35573

THE GREAT LEARNING
FOR GOOD

CONFIDENTIAL

Referred me. The above was personally observed.

[illegible][illegible]

SECRET

[illegible][illegible]

1. 27.1921 - 1. 01.1922 - 1922 - 1923

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