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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico REQUEST FOR (OIL) - (GAS) ALLOWABLE

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

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.

Hobbs, New Mexico

December 28, 1964

(Place)

(Date)

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

Sinclair Oil & Gas Company South Wilson Deep Unit

Well No. **1**, in **NW** $\frac{1}{4}$ **SW** $\frac{1}{4}$,

Company or Operator)

(Lease)

L, Sec. **23**, T. **21S**, R. **34E**, NMPM.,

Wildcat

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 **11-8-63**

Date Drilling Completed **2-20-64**

Elevation **3717**

Total Depth **14365** FBTD **12915**

Top Oil/Gas Pay **12560**

Name of Prod. Form. **Morrow**

PRODUCING INTERVAL -

12642-46, 12750-58, 12772-84,

Perforations **12826-32, 12847-52 & 12892-95**

Open Hole **None**

Depth
Casing Shoe **13992**

Depth
Tubing **12892**

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): _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Choke 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: **2560** MCF/Day; Hours flowed **11**

Choke Size **32/64** Method of Testing: **Meter**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **3500 gal. Mud Acid with Additives F32, Y1 & H2**

Casing Press. **Packer** Tubing Press. **644** Date first new oil ran to tanks **3-4-64**

Oil Transporter: **None**

Gas Transporter: **Phillips Petroleum Company**

660' f/W & 1980' f/S lines

(FOOTAGE)

Tubing, Casing and Cementing Record

Size Feet Sax

13-3/8	923	846
9-5/8	5600	3441
7	13992	510
2-3/8	12892	Tubing

Remarks:

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

Approved **December 28,** 19 **64**

Sinclair Oil & Gas Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

By:

District Superintendent

Title:

Send Communications regarding well to:

Name:

Sinclair Oil & Gas Company

Orig & 4 cc: OCC cc: RFS, File, Partners

Box 1920, Hobbs, New Mexico 88240