

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
(Place)

May 8, 1961
(Date)

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

Shell Oil Company Christmas B, Well No. 2, in SW 1/4 SW 1/4,
(Company or Operator) (Lease)
M, Sec. 25, T. 22S, R. 36E, NMPM., South Eunice Pool
Unit Letter

Lea

County. Date Spudded. 4-20-61 Date Drilling Completed 4-26-61
Elevation 3462' Total Depth 3800' PBD 3782'
Top Oil/Gas Pay 3698' Name of Prod. Form. Queen

Please indicate location:

R-36-E

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

PRODUCING INTERVAL -

Perforations 3698', 3704', 3735' & 3750'

T Open Hole - Depth Casing Shoe 3798' Depth Tubing 3742'

OIL WELL TEST -

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

S Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 42 bbls. oil, 0 bbls water in 4 hrs, - min. Size Choke 16/64"

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
7 5/8"	193	150
4 1/2"	3788	200
2"	3736	

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): 250 G. 15% HDA, 20,000 lease oil, 30,000# sand, 500# Adomite.

Casing Tubing Date first new May 6, 1961
Press. Press. oil run to tanks

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter none

Remarks:

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

Approved: _____, 19____

Shell Oil Company

(Company or Operator)

By: R. A. Lowery

Original Signed By

R. A. LOWERY

(Signature)

Title District Exploitation Engineer

Send Communications regarding well to:

Name Shell Oil Company

Address Box 1858, Roswell, New Mexico

OIL CONSERVATION COMMISSION

By: _____

Title _____