

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57  
**Workover**  
**New Well**  
**Recompletion**

**REQUEST FOR (GAS) ALLOWABLE**

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.

**Eunice, New Mexico**  
(Place)

**March 23, 1959**  
(Date)

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

**Continental Oil Company** **Meyer A-29**, Well No. **3**, in **SE**  $\frac{1}{4}$  **SW**  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

**N** **29** **T 22-S** **R 36-E** **Jalpat** Pool  
Unit Letter Sec. T R NMPM. started

**Lee**

County **Lea** Date Spudded **3-6-59** Date Drilling Completed **3-13-59**  
Elevation **3523'** Total Depth **3600'** PBTD **3348'**

Please indicate location:

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

Top Oil/Gas Pay **3130'** Name of Prod. Form. **Yates**  
**PRODUCING INTERVAL - 3130-50', 3158-64', 3176-82', 3192-3206', 3224-42',**  
Perforations **3254-60', 3280-96', 3320-30', and 3336-42'.**

Open Hole **3527'** Depth Casing Shoe **3527'** Depth Tubing **3297'**

**OIL WELL TEST -**

Natural Prod. Test: **3527'** bbls. oil, **3527'** bbls water in **3527'** hrs, **3527'** min. Size **3527'**

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **3527'** bbls. oil, **3527'** bbls water in **3527'** hrs, **3527'** min. Size **3527'**

**GAS WELL TEST -**

Natural Prod. Test: **3527'** MCF/Day; Hours flowed **3527'** Choke Size **3527'**

Method of Testing (pitot, back pressure, etc.): **3527'**

Test After Acid or Fracture Treatment: **COFP 3666** MCF/Day; Hours flowed **24**

Choke Size **Open** Method of Testing: **Back Pressure.**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **Sandfrased w/16,000 Gals. crude, 16,000# sand, and 800# ADOMITE.**

Casing **3527'** Tubing **3297'** Date first new **3527'**  
Press. **3527'** Press. **3297'** oil run to tanks **3527'**

Oil Transporter **None.**

Gas Transporter **El Paso Natural Gas Company.**

**Tubing, Casing and Cementing Record**

Size	Feet	Sax
<b>10 3/4</b>	<b>320'</b>	<b>200</b>
<b>5 1/2</b>	<b>3527'</b>	<b>600</b>
<b>2 1/2</b>	<b>3297'</b>	<b>- -</b>

Remarks: .....

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

Approved....., 19.....

**Continental Oil Company**

(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: *[Signature]*

Title .....

By: *[Signature]*

(Signature)

Title **District Superintendent**

Send Communications regarding well to:

Name **Mr. J. R. Parker**

Address **Box 68 - Eunice, New Mexico**