

DUPLICATE

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) ~~1957~~ ~~1958~~ 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

2-6-57

(Place)

(Date)

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

Cities Service Oil Company

Closson "B"

Well No. 12

in SW

1/4

SW

1/4

(Company or Operator)

(Lease)

M

(Unit)

Sec. 30

T. 22-S

R. 36-E

NMPM.

Jalmat (oil)

Pool

Lea

County.

Date Spudded

12-27-56

Date Completed

2-5-57

Please indicate location:

Elevation 3536 (Gr.) Total Depth 3783 P.B. 3780

Top oil/gas pay 3564 Name of Prod. Form Yates

Casing Perforations 3682-3710; 3728-3750 (4 shots per ft.) or

Depth to Casing shoe of Prod. String -

Natural Prod. Test - BOPD

based on - bbls. Oil in - Hrs. - Mins.

frac

Test after acid or shot 27 BOPD

Based on 27 bbls. Oil in 24 Hrs. -0- Mins.

Gas Well Potential -

Size choke in inches 20/64

Date first oil run to tanks or gas to Transmission system 1-20-57

Transporter taking Oil or Gas McWood Corporation

Casing and Cementing Record

Size Feet Sax

8 5/8"	1632.81	650 posmix 300 neat
5 1/2"	3768.26	1st stage: 75 neat
		2nd stage: 300 posmix 125 neat

Remarks: Flowed 27 bbls. oil in 24 hrs.; 20/64 choke, FTP 440; PCP 560; GOR 40000.

37.06

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

Approved: 1957, 19

Cities Service Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

[Signature]
(Signature)

Title District Superintendent

Send Communications regarding well to:

Name Geo. M. Geyer

Address Box 97, Hobbs, New Mexico

By: E.J. Fischer

Title District Superintendent