

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.

Jal, New Mexico

5-19-59

(Place)

(Date)

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

Olsen Oils, Inc.

Emery King

Well No. 5

SW

NW

(Company or Operator)

(Lease)

E

Sec. 1

T. 23S

R. 36E

NMPM,

Langlie Mattix

Pool

Unit Letter

Lex

County. Da Spudded 4-21-59

Date Drilling Completed

5-3-59

Elevation 3443.3 DF

Total Depth

3800

PBD

3761

Please indicate location:

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

Top Oil/Gas Pay 3433.3 GL

Name of Prod. Form. Queen

PRODUCING INTERVAL 3673

Perforations 3673-79 3683-91 3704-13 3718-25 3734-44 4/M

Open Hole

Depth

Depth

Casing Shoe 3797

Tubing 3638

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 99 bbls. oil, 5.2 bbls water in 24 hrs, _____ min. Size 16/64

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: _____ 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): 15,000 gal. lease oil 12,000# 20-40 Sd, 3,000# 10-20 Sd.

Casing Press. 440

Tubing Press. 190

Date first new oil run to tanks 5-18-59

Oil Transporter

Texas New Mexico Pipe Line Company

Gas Transporter

Phillips Petroleum

Remarks: 4" OD 11.6# Hydrill set with Brown Model D hookwell parker to seal off casing/hole between 947'-977'

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

Approved _____, 19____

Olsen Oils, Inc.

(Company or Operator)

By: James Watson

(Signature)

Title _____

Send Communications regarding well to:

Name Olsen Oils, Inc.

Address Box 691

Jal, New Mexico

OIL CONSERVATION COMMISSION

By: _____

Title _____

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

27

Company or Operator Olsen Oils, Inc. Lease Emery King

Well No. 5 Unit Letter E S 1 T 23^S R 36^E Pool Langlie Mattix

County Lea Kind of Lease (State, Fed. or Patented) Patented

If well produces oil or condensate, give location of tanks: Unit D S 1 T 23^S R 36^E

Authorized Transporter of Oil or Condensate Texas New Mexico Pipe Line Company

Address Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Phillips Petroleum

Address Bartelsville, Oklahoma

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other ()

Remarks: (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the _____ day of _____ 19____

By Samuel Watson

Approved _____ 19____

Title Super

OIL CONSERVATION COMMISSION

Company Olsen Oils, Inc.

By Samuel Watson

Address Box 691

Title _____

Jal, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Olsen Oils, Inc.		Address Box 691 Jal, New Mexico				
Lease Emery King	Well No. 5	Unit Letter E	Section 1	Township 23 S	Range 36 E	
Date Work Performed 5-3-59	Pool Langlie Mattix		County Lea			

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations ☒ Casing Test and Cement Job ☐ Other (Explain):
☐ Plugging ☐ Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Drilled to 3800 TD and set 3787' of 5 1/2" 15.5# J-55 casing at 3797. Cemented with 550 sx reg. neat and 50 sx latex. Let cement set 24 hours, tested with 1000# for 30 minutes, held 0.0.

Witnessed by <i>Burthum Wilson</i>		Position Production Foreman		Company Olsen Oils, Inc.		
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY						
ORIGINAL WELL DATA						
D F Elev.	TD	PBTD	Producing Interval	Completion Date		
Tubing Diameter	Tubing Depth		Oil String Diameter	Oil String Depth		
Perforated Interval(s)						
Open Hole Interval			Producing Formation(s)			
RESULTS OF WORKOVER						
Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						
OIL CONSERVATION COMMISSION				I hereby certify that the information given above is true and complete to the best of my knowledge.		
Approved by <i>Burthum Wilson</i>				Name <i>Burthum Wilson</i>		
Title				Position Production Foreman		
Date				Company Olsen Oils, Inc.		

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Olsen Oils, Inc.		Address Box 691 Jal, New Mexico				
Lease Emery King	Well No. 5	Unit Letter E	Section 1	Township 23	Range 36	
Date Work Performed 4-22-59	Pool Langlie Mattix			County Lea		

THIS IS A REPORT OF: (Check appropriate block)

- ☒ Beginning Drilling Operations ☒ Casing Test and Cement Job ☐ Other (Explain):
☐ Plugging ☐ Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Spudded at 8:30 a.m., drilled to 323' and set 306' of 8 5/8" 24# J-55 casing at 318'. Cemented with 250 sx cement. Cement circulated to surface. Plugged down at 6 p.m. Let cement set 24 hours, tested with 900# for 30 minutes, held o.k.

Witnessed by <i>Burton Wilson</i>	Position Production Foreman	Company Olsen Oils, Inc.
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

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

Approved by <i>[Signature]</i>	Name <i>Burton Wilson</i>
Title <i>Production Foreman</i>	Position Production Foreman
Date	Company Olsen Oils, Inc.