

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 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.

Jal., New Mexico

9-15-59

(Place)

(Date)

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

Olsen Oils, Inc.

(Company or Operator)

Well No. 3, in NW 1/4 SE 1/4,

(Lease)

J

Sec. 1

T. 23S

R. 36E

NMPM,

Langlie Mattix

Pool

Unit Letter

Lea

County. Date Spudded. 8-25-59

Date Drilling Completed 9-5-59

Please indicate location:

Elevation 3416 DF Total Depth 3758 PBD 3747

Top Oil/Gas Pay Name of Prod. Form.

PRODUCING INTERVAL -

Perforations 3638-54 3663-93 3709-13 3716-32

Open Hole Depth Casing Shoe 3757 Tubing 3538

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 36.6 bbls. oil, 0 bbls water in 2 hrs, min. Size 18/64

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): 2.5 340 24000 # sand 24000 gal lease oil Bill Sanders  
Casing Tubing Date first new  
Press. 340 Press. 25 oil run to tanks 9-14-59

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter Phillips Petroleum Co.

Remarks:

GOR 458/1

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

Approved 1950, 19

Olsen Oils, Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]  
(Signature)

By: [Signature]

Title Engineer

Send Communications regarding well to:

Title Engineer District II

Name Olsen Oils, Inc.

Address Box 691 Jal., New Mex