

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

New Well  
~~100-3423~~

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.

Hobbs, New Mexico - December 22, 1958

(Place)

(Date)

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

Skelly Oil Company

King "C"

Well No. 3

SW

NE

(Company or Operator)

(Lease)

G

1

T 23 S

R 36 E

NMPM.

Langlie-Mattix

Pool

Unit Letter

Lea

County. Date Spudded 12-2-1958

Date Drilling Completed 12-15-1958

Please indicate location:

Elevation 3423' D.F.

Total Depth 3720'

FBTD

Top Oil/Gas Pay 3670'

Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 3670-3710'

Open Hole

Depth

Casing Shoe 3720'

Depth

Tubing 3412'

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): 308 bbls. oil, 0 bbls water in 16 hrs, 0 min. Size 1/2" Choke

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): Fractured Perfs. w/50,000 Gals. Oil & 50,000# Sand

Casing Tubing Date first new Press. 300# oil run to tanks December 20, 1958

Oil Transporter Cactus Petroleum Inc.

Gas Transporter

Remarks:

Flowed 308 barrels new oil in 16 hours through 1/2" choke.

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

Approved: , 19.

Skelly Oil Company

(Company or Operator)

By:

(Signature)

Title

District Superintendent

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 36 - Hobbs, 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

Company or Operator Skelly Oil Company Lease King "C"

Well No. 3 Unit Letter Q 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 B S 1 T 23 S R 36 E

Authorized Transporter of Oil or Condensate Cactus Petroleum Inc.

Address Box 1657 - Midland, Texas  
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas \_\_\_\_\_

Address \_\_\_\_\_  
(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:

\_\_\_\_\_  
Gas being vented.

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

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

Change in Ownership ( ) Other ( )

Remarks: \_\_\_\_\_  
(Give explanation below)

**New Well.**

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

Executed this the 22nd day of December 19 50

Approved \_\_\_\_\_ 19 \_\_\_\_\_

OIL CONSERVATION COMMISSION

By [Signature]  
Title \_\_\_\_\_

By [Signature]  
Title District Superintendent

Company Skelly Oil Company

Address Box 38 - Hobbs, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS  
(Submit to appropriate District Office as per Commission Rule 1106)

COMPANY Skelly Oil Company Box 38 Hobbs, New Mexico  
(Address)  
LEASE King "C" WELL NO. 3 UNIT G S 1 T 23 S R 36 E  
DATE WORK PERFORMED Dec. 16 & 17, 1958 POOL Langlie-Mattix

This is a Report of: (Check appropriate block) ☒ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☐ Plugging ☐ Other \_\_\_\_\_

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

Set 113 joints (3735') of new 5½"OD 14# 8R SS J-55 Casing at 3720' and cemented with 250 sacks by the Halliburton Pump & Plug Process. Plug down 4 A.M. December 16, 1958. W.O.C. 48 hours. Pressured up to 1000# for 30 minutes and casing tested OK. Drilled out cement plug and pressured up to 1000# for 30 minutes and shut-off tested OK.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. \_\_\_\_\_ TD \_\_\_\_\_ PBD \_\_\_\_\_ Prod. Int. \_\_\_\_\_ Compl Date \_\_\_\_\_  
Tbng. Dia \_\_\_\_\_ Tbng Depth \_\_\_\_\_ Oil String Dia \_\_\_\_\_ Oil String Depth \_\_\_\_\_  
Perf Interval (s) \_\_\_\_\_  
Open Hole Interval \_\_\_\_\_ Producing Formation (s) \_\_\_\_\_

RESULTS OF WORKOVER:	BEFORE	AFTER
Date of Test	_____	_____
Oil Production, bbls. per day	_____	_____
Gas Production, Mcf per day	_____	_____
Water Production, bbls. per day	_____	_____
Gas-Oil Ratio, cu. ft. per bbl.	_____	_____
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____		

(Company)

OIL CONSERVATION COMMISSION

Name [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name [Signature]  
Position District Superintendent  
Company Skelly Oil Company

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Skelly Oil Company Box 38 Hobbs, New Mexico  
(Address)

LEASE King "C" WELL NO. 3 UNIT G S 1 T 23 S R 36 E  
DATE WORK PERFORMED December 3 & 4, 1958 POOL Langlie-Mattix

This is a Report of: (Check appropriate block) ☒ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☐ Plugging ☐ Other \_\_\_\_\_

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

Set 12 joints (380') of New 8-5/8"OD 24# 8R SS J-55 Casing at 375' and cemented with 225 sacks by the Halliburton Pump & Plug Process. Cement circulated to the surface. Plug down 5 A.M. December 3, 1958. W.O.C. 24 hours. Pressured up to 1000# for 30 minutes and casing tested OK. Drilled out cement plug and pressured up to 1000# for 30 minutes and shut-off tested OK.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. \_\_\_\_\_ TD \_\_\_\_\_ PBD \_\_\_\_\_ Prod. Int. \_\_\_\_\_ Compl Date \_\_\_\_\_  
Tbng. Dia \_\_\_\_\_ Tbng Depth \_\_\_\_\_ Oil String Dia \_\_\_\_\_ Oil String Depth \_\_\_\_\_  
Perf Interval (s) \_\_\_\_\_  
Open Hole Interval \_\_\_\_\_ Producing Formation (s) \_\_\_\_\_

RESULTS OF WORKOVER:	BEFORE	AFTER
Date of Test	_____	_____
Oil Production, bbls. per day	_____	_____
Gas Production, Mcf per day	_____	_____
Water Production, bbls. per day	_____	_____
Gas-Oil Ratio, cu. ft. per bbl.	_____	_____
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____	_____	_____
	(Company)	

OIL CONSERVATION COMMISSION

Name [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name [Signature]  
Position District Superintendent  
Company Skelly Oil Company