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TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

10529 45000 000

New Well

RECEIVED

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

June 20, 1962

(Place)

(Date)

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

Gulf Oil Corporation

Lee Stebbins (NCT-A)

Well No. **3**

in **SW** 1/4

NE 1/4

(Company or Operator)

(Lease)

F Unit Letter

Sec. **5**

T. **22-S**

R. **37-E**

NMPM.

Hlinchey

Pool

Lee

County. Date Spudded.

Date

6-18-62

Please indicate location:

Elevation **3551**

Total Depth **6575**

P.B.T.D.

6022

Top Oil/ Gas Pay **5705**

Name of Prod. Form. **Hlinchey**

PRODUCING INTERVAL -

Perforations **5856, 5802, 5772, 5748, 5728 and 5705'**

Open Hole

--

Depth

Casing Shoe **6522**

Depth

Tubing **5697'**

OIL WELL TEST -

Natural Prod. Test: _____ 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): **38** bbls. oil, **0** bbls. water in **24** hrs, _____ min. Size **2 1/2" 80/100**

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): **500 Gals 15% HCL, from 4/24,000 gal ref oil 4/1/62 Add H-22 &**

Casing Press. **1500** Tubing Press. **1500** Date first new oil run to tanks **6-1-62** **24 BPO**

Oil Transporter **Shell Pipeline Corporation**

Gas Transporter **Warren Petroleum Corporation**

1570 FWL, 2092 FWL

(FOOTAGE)

Tubing, Casing and Cementing Record

Size Feet Sax

13-3/8"	293	320
9-5/8"	2800	1300
7"	6532	750
2-3/8"	5697'	

Remarks:

Abandoned Drinkard oil and Tub Gas and recompleted in Hlinchey Oil

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

Approved _____, 19.

Gulf Oil Corporation

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

Title _____

By: **J. M. RUSSELL**

(Signature)

Title **Area Production Manager**

Send Communications regarding well to:

Gulf Oil Corporation

Name _____

Box 2167, Hobbs, New Mexico

Address _____