

REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE
HOBBS OFFICE OCC

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-106 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 January 15, 1960
(Place) (Date)

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

Humble Oil & Refining Company N. M. State M, Well No. 19, in NE 1/4 NE 1/4,
(Company or Operator) (Lease)
A, Sec. 31, T 22-S, R 37E, NMPM, Langlie Mattix ~~Unit~~ Pool

Unit Letter
Lea

County. Date Spudded. 11-4-59 Date Drilling Completed 11-14-59
Elevation 3395 DF Total Depth 3784 FSD 3717

Please indicate location:

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

660' from N and E Lines

Top Oil/Gas Pay 3694 Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 3694-3714

Open Hole - Depth Casing Shoe 3780 Depth Tubing *

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): 20 bbls. oil, 8 bbls water in 24 hrs, 0 min. ~~14-64"~~ ~~14-64"~~ ~~SPM~~

GAS WELL TEST -

Natural Prod. Test: - MCF/Day; Hours flowed 0 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): 30,000 gals. Humble Frac and 60,000# sand

Casing Tubing Date first new Press. - Press. - oil run to tanks 1-13-60

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter Skelly Oil Company

Remarks: GOR 1955 Corr. Grav. 33.0

*Tubingless Completion

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

Approved: _____, 19____

Humble Oil & Refining Company

(Company or Operator)

By: *R.P. Churack*
(Signature)

Title Agent

Send Communications regarding well to:

Humble Oil & Refining Company

Name _____

Box 2347 - Hobbs, New Mexico

Address _____

OIL CONSERVATION COMMISSION

By: _____

Title _____