REQUEST FOR (OIL) - (GAS) ALLOWABLE

WABLE New Well HOBBS OFFICE OF 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.

	•				Eunice, New Mexico			June 5, 1961	
					(Place)			(Date)	
				NG AN ALLOWABL			··· /		
nereda	Petro	LOCHE CO	rpera	tion - State JC"	, Well No.	, in.	NW/ 1/4	, RE/	
B	Company	Sec	6	T 23-S R 3	NMPM.	Jalmat		Po	
Unit	Letter								
Lea				County. Date Spud	ied	Date Drilling C	Completed	3201 1/23/31	
Please indicate lo			tion:	Elevation 3469 D.F. Total Depth 3800 PBTD 3229 Top Oil/Gas Pay 3068 Name of Prod. Form. Tates—Seven Rivers					
D	C	B	A	PRODUCING INTERVAL -	Neme	or riods roins			
_ +				Perforations 30	01-31001, 31501	-32 <u>1</u> 01			
E	F	G	H	Open Hole -	Depth Casir	ng Shoe	Depth Tubing 3	135'	
	See	tion 16		OIL WELL TEST -					
L	K	J	T	S Natural Prod. Test:	bbls.oil,	bbls water in	nhrs, _	Choke min. Size_	
M	N	0	P		bbls.oil,		•	Choke	
1		l			DD15,011,	bbls water in	nrs,	min. Size	
				GAS WELL TEST -					
		 _		· —	1100 MCF/I	Day; hours flowed	24 Choke S	ize 32/64*	
•	_	d Gementi		rd Method of Testing (p	itot, back pressure, et	.c.):			
Size		ret	Sax	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed					
8-5/8	" 25	951	250	Choke SizeMethod of Testing:					
5-1/2	" 370	100	400	Acid or Fracture Trea	tment (Gi ve amounts of	materials used, su	ich as acid, w	ater, oil, and	
-		-		sand): Sandoil fi	ac 30,000 gal of	11, 50,000# sa	ind 20-40.		
		1		Casing Tub	ing Date first ss. oil run to	new tanks			
				Oil Transporter					
				Gas Transporter K	rthern Natural (Gas Co.	WHITE SHAWS		
emarks			•••••	********			NAME CHANG	e Roleum copr.	
		•••••	·····	***************************************				HESS-GORP,	
							LIFLOTIVE Jul	y 1. 19 69	
I he	reby cert	ify that	he info	ormation given above is	true and complete to	the best of my kno	owledge.		
pproved		,		19	Amerada	Petroleum Cor	poration.		
PP. OTCO		///		/	~ 1	(Company or C	Operator)		
(ouz en	NSERY/	TION	COMMISSION	Ву:	(1) Lp-0	-1.6		
- 1				2///	• /	(Signatu	re)		
V. (//)	//	4/11	Title Asst.	Dist. Supt.			
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itle	<i></i>		• • • • • • • • • • • • • • • • • • • •		Name. Amera	da Petroleum	Corporati	OR	
	1_					706, Eunice,			
					ACCITESS		· · · · · · · · · · · · · · · · · · ·	→ · ·-	