

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 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.

Midland, Texas

12/17/59

(Place)

(Date)

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

Hill & Meeker

(Company or Operator)

State 36

(Lease)

Well No. 6

in SW

1/4 NE

1/4

G Sec. 36 T. 26S R. 32E NMPM, El Mar Delaware

Unit Letter

Pool

Lea

County. Date Spudded 12/5/59

Date Drilling Completed

12/13/59

Please indicate location:

Elevation 3101 D.F.

Total Depth 4716'

FBTD 4676'

Top Oil/Gas Pay 4598

Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4602 - 4609

Open Hole

Depth

4716

Depth

Tubing 4558.20'

OIL WELL TEST -

Natural Prod. Test: 60 bbls. oil, No bbls. water in 24 hrs, 0 min. Choke 12/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): None bbls. oil, _____ bbls. water in _____ hrs, _____ min. 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): None

Casing

Tubing

Date first new

Press.

Press.

oil run to tanks

12/16/59

Oil Transporter Cactus Petroleum, Inc.

Gas Transporter Pecos Petroleum, Company

Remarks:

AC 43.3 (R-1415)

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

Approved _____, 19____

Hill & Meeker

(Company or Operator)

OIL CONSERVATION COMMISSION

By _____

By: [Signature]

(Signature)

Title Production Clerk

Send communications regarding well to

Title _____

Name Hill & Meeker

Address 519 Midland Savings & Loan Bldg.