

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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-104 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Midland Texas

(Place)

HOMER, 1954

(Date)

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

Ralph Lowe **Shell State "C"**, Well No. **2**, in **SE** $\frac{1}{4}$ **SW** $\frac{1}{4}$,
(Company or Operator) (Lease)
Sec. **36**, T. **23-S**, R. **36-E**, NMPM, **Jalisco** Pool
(Unit)
Lea County. Date Spudded **11-30-47**, Date Completed **2-13-48**

Please indicate location:

Elevation **3150** Total Depth **3600**, P.B.Top oil/gas pay **2875** Top of Prod. Form **2875**

Casing Perforations: or

Depth to Casing shoe of Prod. String **3450**

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential **9,530 MCF**Size choke in inches **Open Flow**Date first oil run to tanks or gas to Transmission system: **3-2-48**Transporter taking Oil or Gas: **El Paso Natural Gas Co.**

Casing and Cementing Record

Size	Feet	Sax
10-3/4	290	150
7	3450	300

Remarks:

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

Approved _____, 19____

RALPH LOWE

(Company or Operator)

By: **W. A. Taylor**

(Signature)

Title **Agent**

Send Communications regarding well to:

Name **Ralph Lowe**Address **Box # 832 Midland, Texas.**

OIL CONSERVATION COMMISSION

By: **L. G. Stanley**

Title _____