

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.

Dallas, Texas

12-5-57

(Place)

(Date)

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

Company or Operator VAUGHN B-3, Well No. 1, in SE 1/4 NW 1/4,
(Company or Operator) (Lease)

Unit Letter F, Sec. 3, T. 24S, R. 36E, NMPM, JALMAT Pool

Loc.

County Lee Date Spudded 12-15-36 Date Drilling Completed 1-24-37

Please indicate location:

Elevation 3405 OL Total Depth 3575 PBD 3290

Top Oil/Gas Pay 3060 Name of Prod. Form. Iates

PRODUCING INTERVAL -

Perforations 3060' to 3140' and 3160' to 3186'

Open Hole None Depth 3535' Depth 3022'
Casing Shoe 3535' Tubing

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

Natural Prod. Test: None MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 1557 MCF/Day; Hours flowed 3

Choke Size .375 Method of Testing: Orifice Tester

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 10,000 gallons of cement fracs with 500 gallons of acid.

Casing 1200 at Tubing 3550 at Date first new _____
Press. 1200 at Press. 3550 at Oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company will be.

Remarks: * Back pressure test by El Paso Natural on 11-5-57 resulted in an open flow potential of 2,650 MCF. Copy of test attached.

** These are maximum pressures during fracture treatment.

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

Approved _____, 19____

CLARA T. SCOTT AND FIRST NATIONAL BANK
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Robert B. Ray Robert B. Ray
(Signature)

Title Petroleum Engineer
Send Communications regarding well to:

Name Robert B. Ray, Trust Dept.,
First National Bank in Dallas
Address P.O. Box 6011
Dallas 22, Texas

By: E. Fischer

Title _____