

NEW! KICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR ~~WELL~~ (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.

Jal, New Mexico

October 11, 1960

(Place)

(Date)

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

~~Olsen Oils, Inc.~~

Myers E

Well No. 3

in NE

1/4

NW

1/4

(Company or Operator)

(Lease)

C, Sec. 13

T. 24S

R. 36E

NMPM, Jalmat

Pool

Unit Letter

Lea

County. Date Spudded. 8-13-60

Date Drilling Completed 10-7-60

Please indicate location:

Elevation 3225.16

Total Depth 3705.5

FRTD

Top Oil/Gas Pay 3002

Name of Prod. Form Yates

PRODUCING INTERVAL -

Perforations 3002-06 3222-3226

Open Hole

Depth

Casing Shoe 2724

Depth

Tubing 3226.08

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Size _____ Choke

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

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: 1420 MCF/Day; Hours flowed 24

Choke Size 1 1/2" Method of Testing: BACK PRESSURE

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1 1/2 gal lease oil, 5000 lb 40/40 sand

Casing _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Tubing, Casing and Cementing Record

Size Feet Sax

9-5/8"	307'	250SX
7"	370'	620SX
2"	3256.08	

Remarks: Top Cement 1325'

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

Approved October 11, 1960 Olsen Oils, Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

Title Drilling Superintendent

Send Communications regarding well to:

Name Olsen Oils, Inc.

Address Box 691, Jal, New Mexico

By: _____

Title _____