

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

9-19-57

(Place)

(Date)

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

W. H. Black, John J. Radfern, Jr.

Well No. 2, in SW 1/4 NW 1/4,

(Company or Operator)

(Lease)

E 8, Sec 8, T 23 S, R 37 E, NMPM, Langlie - Mattix Pool

County. Date Spudded 8-25-57

Date Drilling Completed 9-6-57

Please indicate location:

Elevation 3337.5' Total Depth 3740' PBTD

Top Oil/Gas Pay 3558 Name of Prod. Form. Ferosse Sand

PRODUCING INTERVAL -

Perforations 3650' to 3684' - 388 shots

Open Hole None Depth Casing Shoe 3740 Depth Tubing 3720

OIL WELL TEST -

Natural Prod. Test: 0 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 load oil used): 50 bbls. oil, 0 bbls water in 24 hrs, min. Size Choke 16/64

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): 3000 gals acid, 15,000# sand, 15,000 gallons oil

Casing Press. None Tubing Press. 310 Date first new oil run to tanks 9-18-57

Oil Transporter Permian Oil Company

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	381	390
5 1/2	3740	1300

Remarks:

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

Approved \_\_\_\_\_, 19\_\_\_\_

W. H. Black

(Company or Operator)

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

By: \_\_\_\_\_ (Signature)

Title: Agent

Send Communications regarding well to:

Title \_\_\_\_\_

Name: W. H. Black

Address: Box 174, Midland, Texas