

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
065501065

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.

Hobbs, New Mexico **October 1, 1964**
(Place) (Date)

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

Skelly Oil Company

Hobbs "Q"

Well No. **1**, in **NE** $\frac{1}{4}$ **NW** $\frac{1}{4}$,

(Company or Operator)

(Lease)

"C"

Sec. **16**

T. **24-S**

R. **36-E**

NMPM.

Undesignated

Pool

Unit Letter

Lea

County. Date Spudded **Sept. 4, 1964** Date Drilling Completed **Sept. 21, 1964**

Please indicate location:

Elevation **3388' DP** Total Depth **4212'** PBDT **3833'**

Top Oil/Gas Pay **3733'** Name of Prod. Form. **Seven Rivers**

PRODUCING INTERVAL -

Perforations **3733 - 3741' & 3743 - 3747'**

Open Hole **---** Depth **---** Casing Shoe **3870'** Depth **---** Tubing **3693'**

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 load oil used): **106** bbls. oil, **70** bbls water in **8** hrs, **0** min. Size **2 1/2"** 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): **Treated with 500 gallons Mud Acid**

Casing **---** Tubing **---** Date first new **September 29, 1964**
Press. **Packer** Press. **400#** oil run to tanks

Oil Transporter **The Permian Oil Corporation**

Gas Transporter **None**

Remarks: **Well flowed 106 barrels of oil and 70 barrels of water in 8 hours through 2 1/2" choke, T.P. 400#**

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

Approved: **---**, 19**---**

Skelly Oil Company

(Company or Operator)

Original Signed

By: **Charles J. Love**
(Signature)

OIL CONSERVATION COMMISSION

Title: **District Engineer**

Send Communications regarding well to:

Name: **Skelly Oil Company**

Address: **Box 730 - Hobbs, New Mexico**

By: **---**

Title: **---**

Size	Feet	Sax
	SET AT	
13-3/8"	350'	300
9-5/8"	3870'	300
3-1/2"	3693'	

D	C	B	A
	#1		
E	F	G	H
	Section 16		
L	K	J	I
M	N	O	P

DEVOLUTION AFFIDAVIT

Date October 2, 1964

RECEIVED TIME O.C.C.

OCT 2 3 45 PM '64

New Mexico Oil Conservation Commission

Post Office Box 1980

Hobbs, New Mexico

State of New Mexico

County of Lea

H. E. Aab, of lawful age, being first duly sworn deposes and says:

That he is employed by Shelly Oil Company in the capacity of Dist. Supt. and is fully acquainted with the facts as set forth herein.

That during the months of September 1964, Gackle Drilling Company ran the following Deviation Surveys for Shelly Oil Company on their Hobbs "Q" Well No. 1, in NE 1/4 of NW 1/4 of Sec. 16-24S-36E, 12MPH, Undesignated Pool, Lea County, New Mexico.

SKONE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
350	1/2		
770	1/4		
1255	1/4		
1549	1/4		
1970	2		
2265	2		
2744	1		
2901	1		
3032	1		
3436	2-3/4		
3772	2		
4180	1-3/4		

Subscribed and sworn to before me this 2nd day of October, 19 64.

William F. Krafft Jr.

Notary Public in and for said County and State

My commission expires: August 7, 1965

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

J. E. Aab

Name

Dist. Supt.

Position

Box 730 - Hobbs, New Mexico

Address

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Skelly Oil Company				Lease Hobbs "Q"		Well No. 1	
Unit Letter "Q"	Section 16	Township 24-S	Range 36-E	County Leon			
Pool Undesignated				Kind of Lease (State, Fed, Fee) State			
If well produces oil or condensate give location of tanks		Unit Letter "Q"	Section 16	Township 24-S	Range 36-E		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> The Permian Oil Corporation *				Address (give address to which approved copy of this form is to be sent) P. O. Box 3119 - Midland, Texas			
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/> _____							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

Gas being vented - Waiting on gas connection.

REASON(S) FOR FILING (please check proper box)

New Well <input checked="" type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>	

Remarks

*** Oil will be trucked by Western Oil Transportation Co., Inc.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 1st day of October, 19 64.

OIL CONSERVATION COMMISSION

Approved By

Title

Date

By

**Original Signed
Charles J. Love**

Title

District Engineer

Company

Skelly Oil Company

Address

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Skelly Oil Company				Address Box 730 - Hobbs, New Mexico			
Lease Hobbs "Q"	Well No. 1	Unit Letter "C"	Section 16	Township 24-S	Range 36-E		
Date Work Performed Sept. 26 thru 29, 1964	Pool Undesignated	County Lea					

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations
☒ Casing Test and Cement Job
☒ Other (Explain): **Perforating & Treating**
☐ Plugging
☐ Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Reached Total Depth of 4212' on September 21, 1964. Set 122 joints (3860') of new 9-5/8" OD 36# S-R SS J-55 R-2 RT&C casing at 3870' and cemented with 300 sacks of cement by the Pump & Plug Process. Plug down at 11:30 A.M., September 26, 1964. Temperature Survey indicated top of cement behind 9-5/8" OD casing at 2740'. WOC 24 hours. Pressured up to 600# for 30 minutes and casing tested OK. Did not drill out cement plug at 3833'. FBTD 3833'. Perforated 9-5/8" OD casing 3733-3741' and 3743-3747' with 4 jet shots per foot for a total of 12' and 48 holes. Ran 3-1/2" OD tubing with "RTTS" Packer set at 3699'. Treated through 9-5/8" OD casing perforations 3733-3747' (intervals) with 500 gallons of Western Company's Mud Acid.

Well flowed 106 barrels of oil and 70 barrels of water in 8 hours through 24/64" choke.

Witnessed by Mr. Bob Calhoun	Position Area Foreman	Company Skelly Oil Company
----------------------------------------	---------------------------------	--------------------------------------

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA


D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

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

Approved by 	Name Original Signed Charles J. Love
Title District Engineer	Position District Engineer
Date 10-2-64	Company Skelly Oil Company