

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 QUADRUPPLICATE 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 December 22, 1960
(Place) (Date)

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

Tennessee Gas Transmission Co. State-Monaster, Well No. 4, in SE 1/4 SW 1/4,
(Company or Operator) (Lease)

N, Sec. 16, T. 25-S, R. 32-E, NMPM., Undesignated Pool
Unit Letter

Lee County. Date Spudded 11/29/60 Date Drilling Completed 12/8/60
Please indicate location: Elevation 3425' OL Total Depth 4715' PBD 4679'

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
	X		

Top Oil/Gas Pay 4588' Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4621-25 & 4629-33
Open Hole _____ Depth _____ Casing Shoe 4715' Depth _____ Tubing 4653'

OIL WELL TEST -

Natural Prod. Test: 40 bbls. oil, 107 bbls water in 24 hrs, _____ min. Size 4
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. 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: _____ 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): Washed perforations w/1000 gals mud acid

Casing _____ Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks December 19, 1960

Oil Transporter Cactus Petroleum, Inc.

Gas Transporter None

Remarks: 2. Sub test

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

Approved: _____, 19____ Tennessee Gas Transmission Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: A. V. Lang A. V. Lang
(Signature)

Title: District Production Superintendent
Send Communications regarding well to:

Name: Tennessee Gas Transmission Company

Address: Box 307, Hobbs, New Mexico