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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.

Hobbs, New Mexico December 5, 1961
(Place) (Date)

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

TECHNICO OIL COMPANY J. D. Sosa, Jr. - USA, Well No. 1, in NE 1/4 NE 1/4,
(Company or Operator) (Lease)
K 28 25-S 32-E, NMPM, Paduca, Delaware Pool
Unit Letter

Lee County. Date Spudded 11-10-61 Date Drilling Completed 11-22-61
Please indicate location: Elevation 3374 Total Depth 4755 PBD 4715

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| D | G | B | A |
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| L | K | J | I |
| M | N | O | P |

Top Oil/Gas Pay 4618 Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4618-4627
Open Hole _____ Depth _____
Casing Shoe _____ Tubing 4603

OIL WELL TEST -

Natural Prod. Test: _____ 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): 124 bbls. oil, 248 bbls water in 24 hrs, 0 min. Choke 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): _____

Casing Press. 320 Tubing Press. 0 Date first new oil run to tanks November 29, 1961

Oil Transporter The Permian Corporation
Gas Transporter None

Remarks: See memo, 12/1/61

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

Approved _____, 19____

TECHNICO OIL COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

By: A. W. Long
(Signature)

Title: District Production Superintendent
Send Communications regarding well to:

Name: TECHNICO OIL COMPANY

Address: Box 307, Hobbs, New Mexico

Title _____

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