

**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-104 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.

**Dallas, Texas**

**November 12, 1959**

(Place)

(Date)

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

**Paul P. Scott Trust**

**Wells B-12**

**2**

**NE**

**NE**

, Well No. \_\_\_\_\_, in \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4,

(Company or Operator)

**A**

Sec. **12**

T. **25S**

(Lease)

**36E**

**Jalmat Gas**

Pool

Unit Letter

**Lea**

County. Date Sampled \_\_\_\_\_

Date Drilling Completed

**7-14-52**

Please indicate location:

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

Elevation **2890** Total Depth **3032** PBTD \_\_\_\_\_

Top Oil/Gas Pay \_\_\_\_\_ Name of Prod. Form. **Yates**

PRODUCING INTERVAL -

Perforations

Open Hole **2809-3032** Depth **2809** Depth **2795**  
Casing Shoe \_\_\_\_\_ Tubing \_\_\_\_\_

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: **60** MCF/Day; Hours flowed **24** Choke Size **2"**

Tubing, Casing and Cementing Record

Size	Feet	Sax
<b>9-5/8"</b>	<b>565</b>	<b>To surface</b>
<b>5-1/2"</b>	<b>2809</b>	<b>450</b>
<b>2"</b>	<b>2795</b>	_____

Method of Testing (pitot, back pressure, etc.): **Back Pressure-250#**

Test After Acid or Fracture Treatment: **147** MCF/Day; Hours flowed **24**

Choke Size **2"** Method of Testing: **Back Pressure-Deliverability**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **15,000 Gallons Oil and 22,500# of sand**

Casing Press. **250#** Tubing Press. **250#** ~~to first gas completion~~ **July 27, 1959**

Oil Transporter

**El Paso Natural Gas**

Gas Transporter

Remarks **\*This is not a recompletion in a new zone as the well was merely cleaned out and fraced.**

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

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

**CLARA T. SCOTT AND FIRST NATIONAL BANK**  
**IN DALLAS, TRUSTEE, U.W.O. PAUL P. SCOTT**  
(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: **Robert B. Ray**

(Signature)

Title **Oil Engineer, Trust Department**

Send Communications regarding well to:

Name **First National Bank in Dallas, Attention**  
**Mr. Robert B. Ray, Trust Department**  
Address **P. O. Box 6031, Dallas 22, Texas**