

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
(Place)

May 8, 1959
(Date)

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

Gulf Oil Corporation Leeroy McBuffington, Well No. 11, in SE $\frac{1}{4}$, SE $\frac{1}{4}$,
(Company or Operator) (Lease)

P, Sec. 13, T. 25-S, R. 37-E, NMPM., Justis Ellenburger Pool
Unit Letter

Lea

County. Date Spudded 3-15-59 Date Drilling Completed 4-27-59
Elevation 3084' Total Depth 8201' BTD 8196'

Please indicate location:

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

660' FSL & 990' FEL

Top Oil/~~Gas~~ Pay 7996' Name of Prod. Form. Ellenburger

PRODUCING INTERVAL -

Perforations 7996-8022', 8028-8034', 8080-8098', 8111-8155' & 8161-8174'

Open Hole _____ Depth _____ Casing Shoe _____ Depth _____ Tubing 8174'

OIL WELL TEST -

Natural Prod. Test: 150 bbls. oil, 0 bbls water in 24 hrs, - min. Size 13/64"

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 _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>13-3/8"</u>	<u>401'</u>	<u>450</u>
<u>9-5/8"</u>	<u>3487'</u>	<u>1825</u>
<u>7"</u>	<u>8188'</u>	<u>670</u>
<u>2-3/8" (temp)</u>	<u>8163'</u>	<u>-</u>

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 _____ Tubing _____ Date first new _____
Press. _____ Press. _____ oil run to tanks May 1, 1959

Oil Transporter Texas-New Mexico Pipeline Co.

Gas Transporter El Paso Natural Gas Co.

Remarks: _____

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

Approved _____, 19 _____

Gulf Oil Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: J. M. Russell
(Signature)

Title Area Production Supt.
Send Communications regarding well to:

Name Gulf Oil Corporation

Address Box 2167, Hobbs, N. M.

Title _____