

**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.

Jal., New Mexico

March 30, 1960

(Place)

(Date)

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

Olsen Oils, Inc.  
(Company or Operator)

Winberry  
(Lease)

Well No. 2

in SE 1/4 NE 1/4

NE 1/4

A  
Unit Letter

Sec. 23

T. 25S

R. 37E

NMPM,

Undesignated

Pool

Lee

County. Date Spudded 2-12-60

Date Drilling Completed 3-18-60

Please indicate location:

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

Elevation 3006.2 OL Total Depth 5988 PBD 5962

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

PRODUCING INTERVAL -

Perforations 5922 - 5962 4" per foot

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe 5906 Depth \_\_\_\_\_ Tubing 5935'

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): 112 bbls. oil, 0 bbls water in 24 hrs, \_\_\_\_\_ min. Size 32/64 Choke

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>9 5/8"</u>	<u>832</u>	<u>390 ex.</u>
<u>7 "</u>	<u>5906</u>	<u>660 ex.</u>
<u>160 ex. at D.V. tool at 5002'.</u>	<u>500 ex. above 17 tool.</u>	
<u>2 1/2</u>	<u>5935</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): 5,000 gal. mud acid + 1,000 gal. penetrant acid.

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. 100 oil run to tanks 3-22-60

Oil Transporter New Mexico Pipeline Co.

Gas Transporter El Paso Natural Gas Company

Remarks: \_\_\_\_\_

Top Cement 2,000'

This well to be Dually Completed.

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

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

Olsen Oils, Inc.

(Company or Operator)

**OIL CONSERVATION COMMISSION**

By: Dwight Watson

(Signature)

Title Engineer

Send Communications regarding well to:

Name Olsen Oils, Inc.

Address Box 691 Jal., New Mexico

Title \_\_\_\_\_