

**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**

**12-23-58**

(Place)

(Date)

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

**Tidewater Oil Company**

**A. B. Coates "C"**

Well No. **18**, in **NE**  $\frac{1}{4}$  **SE**  $\frac{1}{4}$ ,

Company or Operator **I** Sec. **24**

(Lease)

T. **25S**

R. **37E**

NMPM,

**Justis Ellenburger**

Pool

Unit Letter

**Lea**

County. Date Spudded **11-5-58**

Date Drilling Completed **12-12-58**

Please indicate location:

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

Elevation **3077** Total Depth **7800** FBTD

Top Oil/Gas Pay **7758** Name of Prod. Form. **Ellenburger** *Jo Ann*

PRODUCING INTERVAL -

Perforations

Open Hole **7758-7800** Depth **7758** Depth **7780**  
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: **113** bbls. oil, **0** bbls water in **14** hrs, **18/64** min. Size

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
<b>13-3/8</b>	<b>540</b>	<b>550</b>
<b>9-5/8</b>	<b>3327</b>	<b>1100</b>
<b>7"</b>	<b>7758</b>	<b>700</b>
<b>2-3/8</b>	<b>7780</b>	<b>---</b>

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 **Pkr.** Tubing **835** Date first new **12-21-58**  
Press. \_\_\_\_\_ oil run to tanks

Oil Transporter **Texas-New Mexico Pipeline Co.**

Gas transporter **El Paso Natural Gas**

**Cement circulated on 13-3/8" & 9-5/8" casing. Cement behind 7" - 3680'.**

Remarks:

**This is a dual well, data pertains only to Ellenburger zone.**

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

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

**Tidewater Oil Company**

(Company or Operator)

By: **E. P. SHACKELFORD**

(Signature)

**Area Supt.**

Title \_\_\_\_\_

Send Communications regarding well to:

Name **H. P. Shackelford**

Address **Box 548 Hobbs, New Mexico**

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

Title \_\_\_\_\_