

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.

NM - 324

Jal., New Mexico 8-23-58

(Place)

(Date)

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

Jal Oil Company, Inc.

Well No. 2

in SE

1/4

1/4

(Company or Operator)

(Lease)

H

Sec 35

T 24 S

R 36 E

NMPM.

Jalmet

Pool

Unit Letter

County. Date Spudded 8-2-58

Date Drilling Completed 8-12-58

Elevation 5269.5 G L

Total Depth 2983

PBTD

2968

Top Gas Pay 2942

Name of Prod. Form. Yates

Please indicate location:

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

PRODUCING INTERVAL -

Perforations 2942 - 54

Open Hole

Depth

Casing Shoe

Depth

Tubing

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): \_\_\_\_\_ bbls, oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Choke Size \_\_\_\_\_

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
9 5/8"	287	250
5 1/2"	2973	400 SXS 150 shoe 250 D tool 1300

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: 2.325 MCF/402 Hours flowed 72

Choke Size \_\_\_\_\_ Method of Testing: Multi point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 5000 gal. gelled lease crude / 5000# sand

Casing Press. 1019 Tubing Press. \_\_\_\_\_ Date first new oil run to tanks \_\_\_\_\_

Oil Transporter Texas New Mexico Pipeline Co.

Gas Transporter El Paso Natural Gas Co.

Remarks: waiting on gas connection

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

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

Jal Oil Company, Inc.

(Company or Operator)

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

(Signature)

Title Engineer

Send Communications regarding well to:

Name Jal Oil Company, Inc.

Address Drawer 2, Jal, New Mexico

OIL CONSERVATION COMMISSION

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

Title \_\_\_\_\_