NEWXICO OIL CONSERVATION COMMI. AON RECEIVED

Santa Fe, New Mexico

Revised 7/1/57

1422 Bank of the Southwest Building

Address Houston 2. Texas

REQUEST FOR (OIL) - (GAS) ALLOWABLE DEC 1 2 1960 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 deliv-RECEIVE ered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. Brushy Draw (Delaware) (Place) DEC 1 9 1960 WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Schram-Federal , Well No. 1 in 51/4 SW 1/4. Curtis Mankamer (Lease) (Company or Operator) S R 29E NMPM. Brushy Draw (Delaware Unit Letter 9/11/60 Eddy Date Drilling Completed 3319 . Total Depth Please indicate location: 3314 Delaware Sand Name of Prod. Form. Top Oil/Gas Pay B A PRODUCING INTERVAL -Perforations F E G. H Depth Depth 3314 Open Hole Casing Shoe 3000 t OIL WELL TEST -L K J I 100 _bbls water in __ 24 hrs, __ Omin. Size NONE bbls.oil, Natural Prod. Test: Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of M P 0 load oil used): ______bbls.oil, ______bbls water in _____hrs, ___min. Size__ 0 1980 fr KL - 660 fr SL Natural Prod. Test: MCF/Day; Hours flowed Choke Size Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):___ Size Feet Sax MCF/Day; Hours flowed Test After Acid or Fracture Treatment: Choke Size Method of Testing: 358 8-5/8 150 sxs Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 5-1/2 3314 neat sand): Date first new Tubina Casing 12/2/60 3000 2× Press. oil run to tanks_ Castus Petroleum Oil Transporter Gas Transporter Remarks: This well was tested with packer and would not flow. Pumping unit was installed We have encountered surface and subsurface lifting problems which with subsurface pump. have prolonged the testing period. I hereby certify that the information given above is true and complete to the best of my knowledge. Curtis Hankamer Approved DEC 1 9 1960 19..... (Company or Operator) C. Hankamer OIL CONSERVATION COMMISSION (Signature) Title Engineer Send Communications regarding well to: Title Name Curtis Hanksmer

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