

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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

**Fort Worth, Texas** **1-10-57**  
(Place) (Date)

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

**Gulf Oil Corporation** **H. T. Mattern "D"**, Well No. **6**, in **SE**  $\frac{1}{4}$  **SW**  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

**N**, Sec. **6**, T. **22-S**, R. **37-E**, NMPM., **Eumont Gas** Pool  
Unit Letter

**Loa** County. Date Spudded **6-5-48** Date Completed **1-3-57**  
**Recompletion started 8-21-56**

Please indicate location:

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

Elevation **3,469'** Total Depth **3,745'** P.B. **3,620'**

Top oil/gas pay **3,168'** Name of Prod. Form **Queen**

Casing Perforations **3168-3190', 3210-3245', 3478-3528', 3548-3596'**

Depth to Casing shoe of Prod. String.....

Natural Prod. Test.....

based on..... bbls. Oil in..... Hrs..... Mins.

Test after acid or shot..... BOPD

Based on..... bbls. Oil in..... Hrs..... Mins

Gas Well Potential **Maximum flow rate on initial test 1,012 NSF/Day at a back pressure of 600 psi**

Size choke in inches.....

Date first oil run to tanks or gas to Transmission system:.....

Transporter taking Oil or Gas: **Permian Basin Pipeline Company**

Casing and Cementing Record

Size	Feet	Sax
<b>9 5/8"</b>	<b>318</b>	<b>200</b>
<b>5 1/2"</b>	<b>3,655</b>	<b>600</b>

Remarks: **Filed in compliance with Rule 11, Order R-520. Application for a non-standard gas proration unit will be submitted.**

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. R. Sherman**  
(Signature)

By: *E. Fischer*

Title: **Division Gas Engineer**  
Send Communications regarding well to:

Title.....

Name: **Gulf Oil Corporation**

Address: **Hobbs, New Mexico**