

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.

Abilene, Texas

7-21-61

(Place)

(Date)

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

McMahon, Wiley & Lowe

Mobil-State

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

(Company or Operator)

(Lease)

P, Sec. **36**, T. **17 S**, R. **33 E**, NMPM., **Wildcat** Pool

Unit Letter

Lee

County. Date Spudded **12-18-60** Date Drilling Completed **1-21-61**

Please indicate location:

Elevation **4107** Total Depth **9290** PBTD **4100**

Top Oil/Gas Pay **3935** Name of Prod. Form. **Queen Sand**

PRODUCING INTERVAL -

Perforations **3952-57', 3962-64'**

Open Hole Depth **4100** Casing Shoe **4070** Tubing **4070**

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): **491** bbls. oil, **0** bbls. water in **24** hrs, **0** min. Choke Size **28/64"**

GAS WELL TEST -

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

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): **500 gal. mud acid, 20000 gal. of oil and 40000 of sand.**

Casing Press. **500** Tubing Press. **200** Date first new oil run to tanks **7-10-61**

Oil Transporter **The Permian Corporation**

Gas Transporter **None**

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	3100	250
9 1/2	4100	250
2 3/8	4070	-

Remarks: _____

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

Approved: _____, 19____

McMahon, Wiley & Lowe

(Company or Operator)

OIL CONSERVATION COMMISSION

By: **J. B. Furr, Jr.**

Agent

(Signature)

Title _____

Send Communications regarding well to:

McMahon, Wiley & Lowe

Name _____

415 Citizens Nat'l Bk., Abilene, Texas

Address _____

By: _____

Title _____