

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.

Roswell, New Mexico January 9, 1962
(Place) (Date)

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

John H. Trigg Federal "FQ" Lease, Well No. 2-4, in. SW $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)
C, Sec. 4, T. 208, R. 35E, NMPM., Pearl Queen Pool
Unit Letter

Lea

County. Lea Date Spudded 11-22-1961 Date Drilling Completed 12-5-1961
Elevation 3685 Total Depth 5037 PBD 5009

Please indicate location:

D	C	B	A
E	F	G •	H
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 4878 Name of Prod. Form. Queen Sand

PRODUCING INTERVAL -

Perforations 4878-4883

Open Hole _____ Depth _____
Casing Shoe 5033 Depth 2" 4871
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): 107 bbls. oil, 8 bbls water in 24 hrs, _____ min. Choke Size _____

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	SAX
<u>8 5/8"</u>	<u>201</u>	<u>125</u>
<u>4 1/2"</u>	<u>5033</u>	<u>250</u>
<u>2"</u>	<u>4871</u>	

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): 250 MCA: S.F. 35,700 gallons oil & 90,000# sand

Casing _____ Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks 1-3-1962

Oil Transporter Shell Pipeline Company

Gas Transporter None

Remarks: _____

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: _____

Title _____

(Company or Operator)
By: John H. Trigg
(Signature)

Title Owner

Send Communications regarding well to:

Name John H. Trigg

Address P.O. Box 520 Roswell, New Mexico