

**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.

**HOBBS, NEW MEXICO**

**MARCH 16, 1957**

(Place)

(Date)

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

**JOHN J. EISNER**

**FLANIGAN**, Well No. **2**, in **NE 1/4 NE 1/4**,

(Company or Operator)

(Lease)

**A** Sec. **33**, T. **19S**, R. **36E**, NMPM, **EUMONT** Pool

Unit Letter

**LEA**

County. Date Spudded **2-11-57**, Date Completed **3-3-57**

Please indicate location:

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

Elevation **3686** Total Depth **4122**, P.B. **4115**

Top oil/gas pay **3938** Name of Prod. Form **PENROSE**  
**3938-3948 4064-4074 4096-4100**  
Casing Perforations: **3952-3960 4084-4090 4108-4112** or

Depth to Casing shoe of Prod. String **4122**

Natural Prod. Test **SMALL** BOPD

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

Test after acid or shot **SAND & OIL FRACTURE** BOPD

Based on **56** bbls. Oil in **24** Hrs. \_\_\_\_\_ Mins.

Gas Well Potential \_\_\_\_\_

Size choke in inches **ON PUMP**

Date first oil run to tanks or gas to Transmission system: **MARCH 16, 1957**

Transporter taking Oil or Gas: **ATLANTIC PIPE LINE**

Casing and Cementing Record

Size Feet Sax

<b>8 5/8</b>	<b>292</b>	<b>250</b>
<b>5 1/2</b>	<b>4122</b>	<b>200</b>

Remarks: \_\_\_\_\_

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

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

**JOHN J. EISNER**

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *E. J. Eisner*

Title \_\_\_\_\_

By: *Edwards Dandy*

(Signature)

Title **PRODUCTION SUPERINTENDENT**

Send Communications regarding well to:

Name **JOHN J. EISNER**

Address **P. O. Box 1158, ARILENE, TEXAS**