

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.

Midland, Texas

May 11, 1959

(Place)

(Date)

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

C. E. LONG

Sinclair-Federal

Well No. 2

SW 1/4

SW 1/4

(Company or Operator)

(Lease)

Unit Letter

Sec. 21

T 19-S

R 37-E

NMPM,

Junice Monument

Pool

Lea

County. Date Spudded. 4/21/59

Date Drilling Completed 5/1/59

Please indicate location:

Elevation 3645' KB

Total Depth 3909' (Sohl) BTD 3901' (Sohl)

Top Oil/Gas Pay 3860'

Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 3860-3870'

Open Hole -----

Depth

Casing Shoe 3908'

Depth

Tubing 3885'

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): 44 bbls. oil, No bbls. water in 24 hrs, ----- min. Choke Size 16/64"

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): 1000 gal. acid. 6000 gal. lsa. crude + 5500 # frac. sand.

Casing 450 # Tubing 190 # Date first new

Press. 450 # Press. 190 # oil run to tanks XX May 10, 1959

Oil Transporter Gulf Oil Corp.-Crude Oil Purchasing Department.

Gas Transporter -----

Remarks:

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

Approved -----, 19-----

C. E. LONG

(Company or Operator)

OIL CONSERVATION COMMISSION

By: -----

C. E. Long

(Signature)

Title

Owner

Send Communications regarding well to:

Name C. E. Long

Address 5 Ezell Bldg., Midland, Tex.

By: -----

Title -----