

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 QUADRUPLICATE to the same District Office to which Form C-103 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.

Fort Worth, Texas

12-6-57

(Place)

(Date)

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

Gulf Oil Corporation

Nacmi Keenum

Well No. 2, in SW 1/4, SE 1/4,

(Company or Operator)

(Lease)

0

14

T

21-S

R

37-E

NMPM.

Tubb Gas

Pool

Unit Letter

Lea

Recompletion started 11-1-57

County Date Spudded 2-14-53

Date Drilling Completed 11-20-57

Please indicate location:

Elevation 3419' Total Depth 7175' PBD 6692'

Top Oil/Gas Pay 6110' Name of Prod. Form. Tubb

PRODUCING INTERVAL -

Perforations 6110', 6171', 6203', 6230', 6256', 6284'

Open Hole Packer set at 6054' Depth Casing Shoe - Depth Tubing 6280'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): bbls. oil, bbls water in hrs, min. Size Choke

GAS WELL TEST -

Natural Prod. Test: None MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: 6000 MCF/Day; Hours flowed 1/4

Choke Size - Method of Testing: 4" orifice well tester and 700 psi back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 13,050 gals acid, 30,000 gal ref. oil

Casing Tubing Date first new Press. Press. oil run to tanks

Oil Transporter

Gas Transporter Permian Basin Pipeline Company

Remarks: Filed in compliance with Rule 11, Order R-586.

Application for an 80-acre 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: (Signature)

By: (Signature)

Title Division Unit Head

Send Communications regarding well to:

Title

Name Gulf Oil Corporation

Address Hobbs, New Mexico