

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.

Eunice, New Mexico January 7, 1961
(Place) (Date)

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

Amerada Petroleum Corporation Well No. 13, in SW 1/4 SW 1/4,
(Company or Operator) (Lease)

M Sec. 24, T 25-S, R 37-E, NMPM, Justis Blinbery Pool
Unit Letter

Lea County. Date Spudded 11/9/60 Date Drilling Completed 12/6/60

Please indicate location:
R-37-E

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

Section 24,
#13

Elevation 3079' D.F. Total Depth 5450' PBD -

Top Oil/Gas Pay 5319' Name of Prod. Form. Blinbery

PRODUCING INTERVAL -

Perforations

Open Hole 5319'-5450' Depth Casing Shoe 5318' Depth Tubing 5341'

25 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): 67.62 bbls. oil, 12.42 bbls water in 8 hrs, _____ min. Choke Size 16/64"

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

| Size | Set | ft | Size |
|---------|-------|-----|------|
| 10-3/4" | 855' | 700 | |
| 11-3/4" | | | |
| 2-7/8" | 5341' | 385 | |
| | | | |
| | | | |

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):

Acidized w/6000 gal. of 15% NE acid & Frac w/10,000 gallons oil & 15,000 20-40 sand
Casing _____ Tubing _____ Date first new oil run to tanks January 7, 1961
Press. _____ Press. _____

Oil Transporter Texas-New Mexico Pipe Line Co.

Gas Transporter El Paso Natural Gas Co.

Remarks: Flowing oil well - Flowed 67.62 bbls oil & 12.42 bbls water in 8 hrs. on 16/64" choke, TP 350#, Gas Volume 92,698 cu. ft gas p/d. GOR 457 - 24 hr rate of oil - 202.80 bbls.

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

Approved January 7, 1961

Amerada Petroleum Corporation
(Company or Operator)

By: [Signature] (Signature)

Title Asst. Dist. Supt.

Send Communications regarding well to:

Name Amerada Petroleum Corporation

Address Box 706, Eunice, New Mexico

OIL CONSERVATION COMMISSION

By: [Signature]

Title