

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 the 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

July 25, 1963

(Place)

(Date)

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

HILL & MEEKER

STATE 10

Well No. 1

in SE

1/4

NW

1/4

(Company or Operator)

(Lease)

F

Sec. 10

T. 10-S

R. 36-E

NMPM, South Crossroads Devonian Pool

Unit Letter

Lee

County. Date Spudded. 4-8-63

Date Drilling Completed 7-13-63

Please indicate location:

Elevation 4024 DF

Total Depth 12,270'

FRTD -

Top Oil/Gas Pay 12,258

Name of Prod. Form. Devonian

PRODUCING INTERVAL -

Perforations

Open Hole 12,235 to 12,270

Depth Casing Shoe 12,235

Depth Tubing 12,135

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 325 bbls. oil, NO bbls. water in 24 hrs, 0 min. Size 16/64

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8	371	350
8-5/8	4209	300
5-1/2	12,235	500
2-3/8	12,135	-

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/250 gal acid & 1000 gal acid

Casing Press. 200 Tubing Press. 215 Date first new oil run to tanks 7-17-63

Oil Transporter The Permian Corporation

Gas Transporter None

Remarks:

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

Approved: _____, 19_____

HILL & MEEKER

(Company or Operator)

By: *J. D. Manning*

(Signature)

Title: Production Supt.

Send Communications regarding well to:

Name: HILL & MEEKER

519 Midland Savings & Loan Bldg.

Address: Midland, Texas

OIL CONSERVATION COMMISSION

By: _____

Title: _____