## REQUEST FOR (OIL) - (GAS) ALLOWABLE TO Rew 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-101 was sept 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.

				•	Widler (Pla	edTexas	Nov. 12,	1957 (Date)
WE AR	E HERI	EBY R	EQUEST	ING AN ALLOWABLE	FOR A WEI	LL KNOWN AS:		(Date)
				Slack, et al				·····¹/4.NW1/4.
				, T <u>128</u> , R3	•			
<b>Lea</b> P	lease inc	dicate le	cation:	Elevation 3884	edsept]	10,1957 Date Dri	lling Complete	d Nov. 7,1957
D	C	В	A	Top Oil/Gas Pay 119	75	Name of Prod. For	m. De von	ien
E	F O	G	H	Perforations Open Hole 11975		Depth Casing Shoe	Dept	th
L	К	J	I	OIL WELL TEST -				Choke
М	N	0	P	Test After Acid or Fractional load oil used):	cture Treatment	t (after recovery o	f volume of oil	l equal to volume of
				GAS WELL TEST - Natural Prod. Test:				
Tubing ,(	_	nd Gemer	ting Recor	Method of Testing (pitc	ot, back pressu	re, etc.):		
13 3,	13 3/8 351		350_	Choke SizeMet				
8 5/	/8 4v	500	1750	Acid or Fracture Treatm sand): Casing Tubing			ed, such as ac	id, water, oil, and
5 1/	<del>/2</del> 119	775	200	Casing Tubing Press.  Oil Transporter Ser	_200_oil	first new run to tanks	• <del>11,195</del> 7	<b>1</b>
2	1129	52	Tubin	Gas Transporter	Markat a	b bline time	arry	
Remarks:	•	••••••••••	•••••••••••	**************************************	``		• 	
				rmation given above is to		ete to the best of m	ny knowledge.	······································
pproved	l		***************************************	, 19	Н.	Compa	y of Operator)	
C	OIL CO	NSERV	MATION	COMMISSION	Ву:	His C	ignature)	<i>l</i>
y: itle	/		/		TireI	istrict Eng Send Communica	z <b>ineer.</b> tions regarding	g well to:
	• • • • • • • • • • • • • • • • • • • •	••••••	•••••••••••		 Name. <u>Ц</u> е	neock-011	ompany	
								dland, Tex.