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-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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

			-			A WELL KI			***	277	
ELLIOTT, INC. (Company or Operator)			•		WYLLE	, Well No.	4	, in	NW	.1/4NW	1/4,
				, T. 218	(Lease) 389	>/2 CD3 C	ELLT	OSEA TEPC			
Unit	Letter	, Sec		., 1	., K	, NMPM.,			•-•	***************************************	Pool
	LEA			County. Dat	e Spudded At	ıg . 19,19 62	Date	Drilling	Completed	Sept. 10	, 19
				Elevation D	• F • 35℃3	Tota	l Depth	7540	PBTD	7502	
Pi	ease ind	icate lo	cauon:			Name					
D	C	В	A						<u> </u>		
X	l			PRODUCING INT						7464-74	
+			 	Perforations_	7402-7406	7410-7416	· 7420	-7 428, '		7.7454-74	59.
E	F	G	H	Open Hole		Depti Casi	h ng Shoe	753 8	Depth Tubina	7430	
	į						-		······································		
,	K	J	I	OIL WELL TEST	•					c	hoke
				Natural Prod.	Testilo Test	bbls.oil,	bb	ls water i	nhrs	,min. S	Size_
						Treatment (after					
	N	0	P	load oil used	і): 98 ы	1s.oil, <u>1/2</u>	bbls w	ater in	24 hrs,	Choke min. Size	3/4
İ	l			GAS WELL TEST							
	ــــــــــــــــــــــــــــــــــــــ		<u>. </u>		•						
7" 4½"	339		150	sand): 2500	ure Treatment (Give amounts of Dowell an	f materia d 12, 0	ls used, s	uch as acid,	water, oil,	
				Press. <u>800</u>	Press. <u>580</u>	Date first OO _oil run to	tanks	Septe	mber 15.	1962	
				Cil Transport	er <u>She</u>	ll Pipelin	e Comp	any			
				Gas Transport	er No:	ne - No Mar	ket				
marks:	C	ement.	was ci	rcu la ted bel					ly 20 ba	rrels.of.	
		coment	7.170 C 17.01	versed from	the hole-	Deviation	surve	y s 4 650	.3/4 dea	ree.	
•••••				e, 6181, 1							
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I he	reby cer	tify tha	t the info	rmation given a	above is true a						
proved			••••••		, 19	ELLIO		G		<i>y</i>	
	_	•						MPRRY DE	perator		
(SIL CO	NSER'	VATION	COMMISSIO	N	By:		J. K.	[]		 -
			/			1	·	(Signate			
	///	7/	-			[11!P		e si dent			
	•	•••••	••••••		***************************************	Sen	d Comm	unications	regarding	well to:	
-	-								•		
le	- <i>f</i> (-										
e	- fi.		•••••			Name ELL	JOTT,	INC.	1, New M		