

REQUEST FOR (OIL) - (GAS) ALLOWABLE SEP 1.4 196 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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

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E ARE I			ING AN ALLOWABL				
(Co	mpany or C	perator)	rn-Iates S	Lease)	<u> </u>	, in)	!/4! /4
J Unit La	, Se	c 25	, T 17S , R		Espire	Abo Undes:	ignatedPoc
E	ddw		County. Date Spud	8-27-60	Data Dut 11	tana Arran Inter 1	
		location:	Elevation 368	ZTotal	Depth	37. PBTD	
			Top Oil/Gas Pay	6163Name c	of Prod. Form.	Ahe	
D	СВ		PRODUCING INTERVAL -				
			Perforations	6286 - 6302	0 /a1		
E	FG	H		Denth		Depth	
				Casing	Shoe	Tubing	6364
L	K J	I	<u>OIL WELL TEST</u> -				Choke
	x		Natural Prod. Test:	bbls.oil,	bbls wat	er inhrs	,min. Size_
M	N O	P	Test After Acid or F	racture Treatment (after	recovery of	volume of oil e	qual to volume of
		+	load oil used):	bbls.oil, 0	_bbls water i	n' <u>10</u> hrs, (
			GAS WELL TEST -				· · ·
1650 1	3 19	80 FE	Natural Prode Test:	MCF/Da			
Size	Feet	Sax	include of reduing (p.	itot, back pressure, etc			
-5/8"	742 .	350		Method of Testing:			
_			Le et HIS HID				
5-1/2"	63801	150 alt	incor 45 gol.	tment (Give amounts of m	naterials used	, such as acid,	water, oil, and
			Casing Tubi	tment (Give amounts of m 000 galleng 15% ng Date first r	new	leid with D	s-50_added
eur eur	6098 1			oil run to a	anks	Y-0-0()	
			Dil Transporter				
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