

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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Denver City, Texas 11 June 59
(Place) (Date)

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

Fred M Allison Federal Beddingfield, Well No. 2, in SE $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)

N Sec. 1, T. 17N, R. 27E, NMPM., Square Lake Pool
Unit Letter

Edgy County. Date Spudded 11 April Date Drilling Completed 9 May

Please indicate location:

Elevation _____ Total Depth 2820 PBTD 2812

Top Oil/Gas Pay 2656 Name of Prod. Form. Grayburg-San Andres

PRODUCING INTERVAL -

Perforations 2656 - 2664 2760 - 2768

Open Hole none Depth 2812 Casing Shoe 2812 Tubing 2805

OIL WELL TEST -

Natural Prod. Test: no free oil 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 Choke load oil used): 42 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size pumping

GAS WELL TEST -

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

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): 30,000 gallons refined oil and 97,000 pounds sand

Casing 35,000 Tubing 4,200 Date first new 4 June 1959
Press. 35,000 Press. 4,200 oil run to tanks

Oil Transporter Texas - New Mexico Pipe Line Co

Gas Transporter _____

Remarks: _____

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

Approved JUN 11 1959, 19____ Fred M Allison
(Company or Operator)

OIL CONSERVATION COMMISSION

By: M L Armstrong Title Representative
(Signature)

Title OIL AND GAS INSPECTOR Send Communications regarding well to:

Name Fred M Allison

Address P.O. Box 916 Corsicana, Texas

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|-----------------------------|---|
| OIL CONSERVATION COMMISSION | |
| ARTESIA DISTRICT OFFICE | |
| No. Copies Rec'd | 2 |
| | |
| | |
| OFFICE | |
| SANITARY | |
| INDUST. DIV. OFFICE | |
| STATE LAND OFFICE | |
| U. S. G. S. | |
| TRANSPORTER | |
| FILE | |
| BUREAU OF MINES | |

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Fred M Allison Lease Fed Bettingfield
Well No. 1 Unit Letter N S 1 T 173 R 295 Pool Square Lake
County Elbert Kind of Lease (State, Fed. or Patented) Federal No 029733
If well produces oil or condensate, give location of tanks: Unit N S 1 T 173 R 295
Authorized Transporter of Oil or Condensate Texas - New Mexico Pipe Line Co,

Address P.O. Box 1430, Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____
Address _____
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

No available market. Gas being vented

Reasons for Filing: (Please check proper box) New Well ()
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other ()
Remarks: _____
(Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 11 day of June 19 59

By Robert B. Sell

Approved JUN 11 1959 19 59

Title Representative

OIL CONSERVATION COMMISSION

Company FRED M. ALLISON

By M. L. Armstrong

Address P.O. Box 916 Corsicana, Texas

Title OIL AND GAS INSPECTOR

| OIL CONSERVATION COMMISSION | | |
|-----------------------------|--|--|
| ARTESIA DISTRICT OFFICE | | |
| No. Control Entry No. 1 | | |
| DATE FOR FILING | | |
| OPERATOR | | |
| SALE PRICE | | |
| PRODUCTION OFFICE | | |
| STATE LAND OFFICE | | |
| U. S. G. S. | | |
| TRANSPORTER | | |
| FILE | | |
| DEPARTMENT OF MINES | | |