

REQUEST FOR (OIL) - (GAS) ALLOWABLE DEC 30 1958

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 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.

Garfield, New Mexico 12/29/58
(Place) (Date)

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

Corine Foster Oil Company/D.H. Goodrich, Well No. 1, in NW 1/4 NW 1/4,
(Company or Operator) (Lease)
D Sec. 35, T. 16 S, R. 26 E, NMPM, Undesignated Pool
Unit Letter

County Garfield Date Spudded 10/23/58 Date Drilling Completed 12/16/58
Elevation 5604-5624' Total Depth 6400' PBD

Top Oil/Gas Pay 6000-6210' Name of Prod. Form. Abn Reef

PRODUCING INTERVAL -

Perforations Abn 5604-5624' and Wolfcamp 6202-6310'

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing _____

OIL WELL TEST -

Natural Prod. Test: -0- 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 load oil used): 250 (Abn) bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size 1 1/4
100 (Wolfcamp)

GAS WELL TEST -

Natural Prod. Test: -0- 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): 11,000 gallons acid

Casing _____ Tubing _____ Date first new
Press. 800# 700# oil run to tanks 12/16/58

Oil Transporter Male Oil and Refining Co.

Gas Transporter _____

Remarks: This well was drilled with rotary to total depth & cement was circulated to surface on 5 1/2" casing. Production packer setting at 5600' and retrievable bridge set at 5690', intend to apply for dual allowable later date on Wolfcamp and Abn Reef.

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

Approved December 29 DEC 31 1958, 19 58

Corine Foster Oil Co.
(Company or Operator)

By: Stanley L. Jones
(Signature)

Title Agent
Send Communications regarding well to:

Name Stanley L. Jones

Address 30 W. Greene, Apt. 12, Garfield, N.M.

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title _____

OFFICE OF THE CHIEF OF POLICE

RECEIVED

NOV 19 1964

10:00 AM

TO: SAC, NEW YORK

FROM: SAC, NEW YORK

SUBJECT: [illegible]