

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.

Trinity, N. M. Nov. 23, 1963
(Place), N. M. (Date)

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

Gr. ridge Corporation Reeler, N. M. Well No. 3-2, in N. M. 1/4 - 1/4,
(Company or Operator) (Lease)

J. Letter, Sec. 27, T. 18S, R. 28E, NMPM, Artesia Pool

Eddy County Date Spudded 7-2-62 Date Drilling Completed 7-5-62

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

2310/1 + E

Tubing, Casing and Cementing Record

Size	Feet	Size
7	513	150
	2023	125
2	20	

Elevation 3560 (GL) Total Depth 2025 PBTD 2000

Top Oil/Gas Pay 1994 Name of Prod. Form. 1st Grayburg

PRODUCING INTERVAL -

Perforations 1995-2000

Open Hole Depth Casing Shoe 2023 Depth Tubing 2000

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls. water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 70 bbls. oil, 20 bbls. water in 2 hrs, min. Size

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):

5400 gals. Fresh water, 2000 20/40 sd. 10,000
Casing Tubing Date first new
Press. Press. 20 oil run to tanks 11-12-63 20/40 sd.

Oil Transporter Continent 1 Pipe Line Company

Gas Transporter

Remarks:

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

Approved NOV 20 1963, 1963 Gr. ridge Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong
Title: District Engineer

By: J. C. Chapman
(Signature)

Title: Engineer
Send Communications regarding well to:

Name: Gr. ridge Corporation

Address: Drawer B, Artesia, N.M.

OIL CONSERVATION COMMISSION		
ARTIFICIAL REEF OFFICE		
No. Certificate	5	
Reef Name		
Reef No.	2	
Reef Type	1	
Reef Location	1	
Reef Status		
Reef Date		
Reef Remarks	1 -	