

REQUEST FOR (OIL) - (GAS) ALLOWABLE 1964 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.

Artesia, New Mexico November 30, 1964 (Place) (Date)

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

Graridge Corporation Resler Yates State, Well No. 322, in NE 1/4 SE 1/4, (Company or Operator) (Lease) Unit Letter I, Sec. 20, T. 18S, R. 28E, NMPM., Artesia Pool

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Please indicate location:

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

1980 F&L, 660 F&L

Tubing, Casing and Cementing Record

Size	Feet	S&S
7	511	150
4 1/2	2327	100
2 1/2	2012	0

County Date Spudded 10-31-64 Date Drilling Completed 11-3-64 Elevation 3590 Total Depth 2330 PBD 2309

Top Oil/Gas Pay 2023 Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 2023-34 and 2289-99

Open Hole None Depth Casing Shoe 2327 Depth Tubing 2012

OIL WELL TEST - Flowing

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 load oil used): 80 bbls. oil, 0 bbls water in 24 hrs, min. Size 18/64 Choke

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): 750 gals. acid, 30000 gals. oil, 29,670# sand

Casing 0 Tubing 220 Date first new Press. 0 Press. 220 oil run to tanks November 18, 1964

Oil Transporter Continental Pipe Line Company

Gas Transporter None

Remarks: RECEIVED

DEC 1 1964

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

Approved: DEC 1 1964, 19.

Graridge Corporation ARTESIA, OFFICE (Company or Operator)

By: Thomas E. Lee (Signature)

Title Superintendent Send Communications regarding well to:

Name Graridge Corporation

Address Drawer B, Artesia, New Mexico

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title OIL AND GAS INSPECTOR

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