

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 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.

Midland, Texas 11-27-61

(Place)

(Date)

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

Western Natural Gas Company Wimberley, Well No. 5, in NE 1/4 NW 1/4,
(Company or Operator) (Lease)

C 24, Sec. 25-S, T. 37-E, R. 37-E, NMPM., Justice Blinbery Pool
Unit Letter

County. Date Spudded 3-22-58 Date Drilling Completed 3-28-58
Elevation 3077.6 G.L. Total Depth 8210 PBD 6823

Please indicate location:

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

Top Oil/Gas Day 5391 Name of Prod. Form. Blinbery

PRODUCING INTERVAL -

Perforations 5391-5403, 5417-5423, 5439-5444, 5477-5483

Open Hole Depth Casing Shoe Depth Tubing 5441

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 load oil used): 368 bbls. oil, No bbls water in 24 hrs, min. Size 22/64"

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): 10,000 gal oil & 47,000# sand and 1000 gal Dowell acid

Casing Tubing Date first new Press. 1230 oil run to tanks 10-25-61

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter El Paso Natural Gas Company

Tubing, Casing and Cementing Record

Size	Feet	Sax
1 3/8	532	350
9 3/8	3376	2363
7	8085	1100
2 3/8	5441	

Remarks: *Cancel Justice Blinbery Allowable*

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

Approved: _____, 19_____

WESTERN NATURAL GAS COMPANY

(Company or Operator)

By: *Russ Woodward*
(Signature)

Title: Office Manager

Send Communications regarding well to:

Name: Western Natural Gas Company

Address: 823 Midland Tower, Midland, Texas

OIL CONSERVATION COMMISSION

By: _____

Title: _____

