

# 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.

Midland, Texas January 20, 1964

(Place)

(Date)

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

Redfern Development Corporation, Well No. 1, in SW 1/4 SW 1/4, (Company or Operator) (Lease)

M. Sec. 11, T. 10S, R. 32E, NMPM., UNDESIGNATED Pool

Unit Letter

County. Date Spudded. 12-14-63 Date Drilling Completed 1-14-64  
Elevation 4329 KB Total Depth 4410 PBD 4320

Please indicate location:

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

Top Oil/Gas Pay 4152 Name of Prod. Form. SAN ANDRES

PRODUCING INTERVAL -

Perforations 4152-58; 4229-35'

Open Hole NONE Depth 4380' Depth 4250'  
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: NONE 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): 48 bbls.oil, 0 bbls water in 24 hrs, min. Choke Size 2"

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8"	364'	250
4-1/2"	4403'	190

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): 2000 gallons gelled acid plus 16 bbl.oil flush

Casing Press. 200 Tubing Press. 0 Date first new oil run to tanks January 14, 1964

Oil Transporter McWood Corporation

Gas Transporter None

Remarks:

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

Approved: 1964, 19

REDFERN DEVELOPMENT CORPORATION

(Company or Operator)

By: Frank W. Podpechan (Signature)

Title Geologist

Send Communications regarding well to:

Redfern Development Corporation

Name

Address P. O. Box 1747, Midland, Texas

OIL CONSERVATION COMMISSION

By: [Signature]

Title