

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.

Roswell, New Mexico May 31, 1962
(Place) (Date)

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

The Atlantic Refining Company, Miller, Well No. 1, in SE $\frac{1}{4}$ SW $\frac{1}{4}$,
(Company or Operator) (Lease)
N, Sec. 12, T. 8-S, R. 34-W, NMPM, Undesignated Pool
Unit Letter

Roosevelt County. Date Spudded 5-9-62 Date Drilling Completed 5-21-62

Please indicate location:

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

Elevation 4249' GL Total Depth 1675 FSTD 4639

Top Oil/Gas Pay 4589 Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 4589-4600, 4600-11, 4620-26

Open Hole _____ Depth _____ Casing Shoe 1674 Depth _____ Tubing 4590.28

OIL WELL TEST -

Natural Prod. Test: _____ 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): 196 bbls. oil, 1 bbls water in 16 hrs, 30 min. Choke Size 18/64

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): 2000 gal. 15% HCl Acid & 20,000 gal. & 17,750 20-40 Sand

Casing _____ Tubing _____ Date first new _____
Press. 500# Press. 300# oil run to tanks 5-25-62

Oil Transporter Permian Corporation

Gas Transporter one

660# FSL & 1980 FSL

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8 5/8"</u>	<u>390.95</u>	<u>250</u>
<u>4 1/2"</u>	<u>4664.15</u>	<u>430</u>
<u>2"</u>	<u>4581.43</u>	

Remarks: Miller

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

Approved _____, 19____ The Atlantic Refining Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____ Original Signed
A. D. Kloxin (Signature) _____

Title _____ District Production Drilling Supervisor

Name _____ The Atlantic Refining Company

Address _____ Box 1978, Roswell, New Mexico