

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
(Place)

October 24, 1961
(Date)

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

BTA Oil Producers ALLISON, Well No. 1, in NW 1/4 SE 1/4,
(Company or Operator) (Lease)
J, Sec. 36, T -8-S, R -36-E, NMPM, Allison Pool
Unit Letter
Roosevelt

Please indicate location:

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

1830 FSL - 1980 FEL

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8"	385	300
8-5/8"	4190	450
4-1/2"	9664	300
2-3/8"	9647	---

County. Date Spudded 9-12-61 Date Drilling Completed 10-20-61
Elevation 4048 GL Total Depth 9664 PBD 9663

Top Oil/Gas Pay 9040 Name of Prod. Form. Pennsylvanian

PRODUCING INTERVAL -

Perforations 9040-59

Open Hole --- Depth Casing Shoe 9664 Depth Tubing 9647

OIL WELL TEST -

Natural Prod. Test: 12 bbls. oil, -0- bbls water in 3 hrs, --- min. Choke Size 34/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 205 bbls. oil, 4 bbls water in 24 hrs, --- min. Choke Size 20/64

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): Acidized w/500 gal., 15% NE.

Casing Tubing Date first new Press. pkr. Press. 700 oil run to tanks 10-23-61

Oil Transporter Magnolia Pipe Line Co.

Gas Transporter Sinclair Oil & Gas Company

Remarks:

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

Approved: _____, 19_____

OIL CONSERVATION COMMISSION

By: _____
Title _____

BTA Oil Producers

(Company or Operator)

By: _____
(Signature)

Title Production Superintendent
Send Communications regarding well to:

Name BTA Oil Producers

Address 104 South Pecos, Midland, Texas