

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion
~~Re-Entry~~

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.

Hobbs, New Mexico March 9, 1961
(Place) (Date)

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

Robinson Bros. Oil Producers Henry-Elliott, Well No. 1, in NE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)
C, Sec. 22, T. 11 S, R. 31 E, NMPM., T-V Penn. Pool

Chaves

County. Date Spudded 11-26-59 Date Drilling Completed 3-1-60
Elevation 4470 Total Depth 11,002 PBD 10,963

Please indicate location:

Top Oil/Gas Pay 10,868 Name of Prod. Form. Penn. (Morrow Sand)

PRODUCING INTERVAL -

Perforations 10,868 - 10,910

Open Hole None Depth Casing Shoe 11,000 Depth Tubing 10,724

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: 18,000 MCF/Day; Hours flowed 1 Choke Size 1/4"

Method of Testing (pitot, back pressure, etc.): DST - pitot

Test After Acid or Fracture Treatment: 10,000 MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: A point back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

1500 gals. HBA, 6000 gals. Mud Acid, 25,000 gals. Mud Acid
Casing _____ Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter The Permian Corporation (Dist.)

Gas Transporter El Paso Natural Gas Company

660' FNL & 1980' FNL

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	905	Unknown
9 5/8	3613	Unknown
5 1/2	11,000	200
2 3/8	10,724	

Remarks: Old well re-entry.

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

Approved _____, 19____

Robinson Brothers Oil Producers
(Company or Operator)

By: _____
(Signature)

OIL CONSERVATION COMMISSION

By: _____

Title Agent

Title _____

Send Communications regarding well to:

Name Oil Reports & Gas Services

Address Box 763, Hobbs, New Mexico