

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.

Roswell, New Mexico
(Place)

April 28, 1959
(Date)

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

John H. Trigg Federal Trigg, Well No. 31-4, in SW $\frac{1}{4}$ NW $\frac{1}{4}$,
(Company or Operator) (Lease)

E, Sec. 4, T. 14S, R. 31E, NMPM., Caprock Queen Pool

Chaves

County. Date Spudded 2-18-59

Date Drilling Completed 2-25-59

Please indicate location:

Elevation 4137 Total Depth 2770 PBD

Top Oil/Gas Pay 2735 Name of Prod. Form. Queen Sandstone

PRODUCING INTERVAL -

Perforations 2735 - 2746

Open Hole _____ Depth _____ Casing Shoe 2768 Depth _____ Tubing 2735

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): 26 bbls. oil, No bbls water in 24 hrs, _____ min. Choke Size 5/8"

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): 13,000 gallons of oil, 24,000# sand

Casing _____ Tubing _____ Date first new _____
Press. 675# Press. 250# oil run to tanks 3-31-59

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter _____

Tubing, Casing and Cementing Record

Size Feet S&S

<u>8 5/8</u>	<u>100</u>	<u>30</u>
<u>4 1/2</u>	<u>2768</u>	<u>100</u>

Remarks: 32-1-17-11-12

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

Approved _____, 19 _____

John H. Trigg

(Company or Operator)

OIL CONSERVATION COMMISSION

By: John H. Trigg
(Signature)

Title Owner
Send Communications regarding well to:

Name John H. Trigg Company

Address P. O. Box 5629 Roswell, New Mexico

By: _____

Title _____