

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, N.M.

December 2, 1958

(Place)

(Date)

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

Byard Bennett

Zimmerman

4-A

NW

SW

1/4

(Company or Operator)

L

Sec. 21

T

14 S

(Lease)

31 E

NMPM.

Caprock-Queen

Pool

Unit Letter

Chaves

County. Date Spudded

11/16/58

Date Drilling Completed

11/23/58

Elevation

4212 GL

Total Depth

2915

PBTD

Top Oil/Gas Pay

2882

Name of Prod. Form.

Queen

PRODUCING INTERVAL -

2883' - 2889'

Perforations

Depth

2911'

Depth

2880'

Open Hole

Casing Shoe

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 50 bbls. oil, 0 bbls water in 9 hrs, 0 min. Size Swab

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): 5,000 gal. oil 5,000# sand

Casing Press. 155 Tubing Press. 95 Date first new Nov. 28, 1958

Oil Transporter Texas-New Mexico Pipe Line Co.

Gas Transporter

Tubing, Casing and Cementing Record

Size Feet Sax

8-5/8	162	100
5-1/2	2911	125
2	2880	

Remarks:

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

Approved: _____, 19_____

Byard Bennett

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

Title _____

By: _____

(Signature)

Operator

Title _____

Send Communications regarding well to:

Byard Bennett

Name _____

Box 48 Roswell, N.M.

Address _____