

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-104 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 June 22, 1959  
 (Place) (Date)

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

Great Western Drilling Company (Company or Operator), Well No. 2, in SW 1/4 SW 1/4, M 5, T. 13-S, R. 32-E, NMPM., Caprock Queen Pool

Lea County. Date Spudded May 30, 1959 Date Drilling Completed June 6, 1959  
 Elevation 4385' Total Depth 3069' PBD 3069'

Please indicate location:

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

Top Oil/Gas Pay 3050' Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations  
 Open Hole 3049 - 3069 Depth 3049 Casing Shoe 3049 Depth 3058 Tubing

OIL WELL TEST -

Natural Prod. Test: 18 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size  
 Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 70 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
9 5/8	273	225
7"	3049	100

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):

500 gal. acid, 7500 gal. lease crude oil, 250# sand  
 Casing Tubing Date first new  
 Press. 50 Press. 30 oil run to tanks June 20, 1959

Oil Transporter Service Pipe Line Company

Gas Transporter

Remarks: 300-1 (70 PWT)

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

Approved: Great Western Drilling Company (Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature) (O.H. Crews)  
 Title: General Superintendent  
 Send Communications regarding well to:

Name: Great Western Drilling Company  
 Address: Box 1659, Midland, Texas