## 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

AT ADE L	IFDFRV D	FOUESTU	NG AN ALLO	WARIE EO	(Place)	New Mexico	••••••••••••	(Date)
HARVEY I	HURLE	Atlan	tic State "/	An (Lassa)	Well No	o3	., in NW	. <sub>1/4</sub> SW
ط Unik Lei	Sec	. 21	., T	ر , R	NMPM.,	Saunde		Pc
•			County Des		6/5/59	Date Drill:	ing Completed	7/14/59
	e indicate		Elevation 1	214 DF		al Depth 10	OlO† PBID	
Picas	e indicate	location:	Top Oil/Gas Pa	av 9905†	Nam	e of Prod. Form.	9,	
D	C B	A					<del></del>	
			PRODUCING INTE		. 1			
E	F G	H	Perforations_	9905-2	<b>26</b> Dep	+h	Depth	<del></del>
-		"	Open Hole		Cas	ing Shoe 10,01	Depth Tubing	99161
			OIL WELL TEST					
L	K J	I			bble oil	bbls wat	on in here	Cho
1								
M	N O	P				ter recovery of		
	-	-	load oil used	): 130.90 bi	bls,oil,	bbls water i	hrs,	min.Size
			GAS WELL TEST	-				
1980/8	≥ 790/W		Natural Prod.	Test:	MCF	/Day; Hours flow	ed Chak	e Size
ubing Cas	ing and Cem	enting Recor	_			etc.):		
Size	Feet	Sax						
	1		Test After Ac:	id or Fracture	e Treatment:	<del></del>	_MCF/Day; Hour	s flowed
13-3/8" 310' 325 ax		Choke Size	Method	of Testing:	<del></del>	· · · · · · · · · · · · · · · · · · ·		
lan		3.000	Acid or Fractu	ire Treatment	(Give amounts o	of materials used	l. such as acid.	water, oil, ar
8-5/8	42241	1800 sx	sand): A/	_			., 20 2227,	,,,
5-1/2#	10,010	500 sx	Casing	Tubing	Date firs	st new to tanks 7/19		<del></del>
	20,020	700 52	Press.pkr	Press <b>18</b>	oil run t	to tanks 7/19	<u>/59</u>	<del></del>
2# tbg	@ 9916*		Oil Transporte	r Servi	ce Pipe Lir	ie		
2 000	//20		Gas Transporte	r Warre	n Pet. Corr	<b>)</b>		·
emarks:		***:						
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pproved	••••••	••••••••••••	••••••	, 19	114.14.13.1	*********	or Operator)	
		11	·····		_		,	
OI	L CONSE	RVATION	COMMISSION	₩ //	By:	/ (Sie	nature	
'''''	( )	Kiti.	1 - 1/2 /2	///	Agent	b pil.	<b>3</b>	
<u>y:</u>	<u>Carlotta in the carlotta in t</u>	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (		<u></u>	Title	nd Communicati	ons regarding	well to:
itle							_	, <del></del>
		***************************************			Name Hai	rvey L. Hurl	.ey	
					101	12 Midland N	at'l Bank l	Bldg.
						iland, Texas		