

# 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.

Hobbs, New Mexico

9-3-57

(Place)

(Date)

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

Phillips Petroleum Company

Ranger

Well No. 3

in NW 1/4 SE 1/4

(Company or Operator)

J, Sec. 23, T. 12-S, R. 34-E, NMPM, Ranger Lake Pennsylvanian Pool

Unit Letter

Lea

County. Date Spudded. 6-26-57

Date Drilling Completed 8-22-57

Please indicate location:

Elevation 4160 RKB

Total Depth 10372

PBTD 10360 PBTD

Top Oil Pay 10238

Name of Prod. Form. Pennsylvanian

PRODUCING INTERVAL -

Perforations 10334-10344

Open Hole

Depth

Casing Shoe 10371

Depth

Tubing 10356

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): 586 bbls. oil, 0 bbls. water in 24 hrs, min. Size 3/8"

GAS WELL TEST - based on 293 BO in 12 hours.

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): Acidized with 500 gallons 15% regular.

Casing Tubing Date first new Press. 5300 oil run to tanks 9-2-57

Oil Transporter Service Pipe Line Company

Gas Transporter None

Tubing, Casing and Cementing Record

Size Feet Sx

13 3/8	358	375
8 5/8	4225	810
5 1/2	10371	820

Remarks:

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

Approved, 19

Phillips Petroleum Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

By:

Title. District Chief Clerk

Send Communications regarding well to:

Title

Name. Phillips Petroleum Company

Address. Box 2105, Hobbs, New Mexico