NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Ravised 7/1/57

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.

						Midland	, Texas	7-6-	59
	c IIED	EDV D	roureau	10 AN ATTO		(Place)		(Da	
_						R A WELL KN		1993	
Case	Compa	ny or Op	crator)	J	· Reed (Leac)	, Well No	2 , in	N.S	NB1/4,
: A Unit	Letter	, Sec.	35	, T 13-S	., R 37- E	E, NMPM.,	King-Wolfe	амр	P∞l
	L	ea		County. Dat	te Spudded	8-20-56	Date Drilling Co	mpleted 11-	20-56
P	Please indicate location:						Depth 12,590		3954
D	С	В	A	Top Oil/Gas F		Name o	f Prod. Form.	Wolfcamp	
ļ			No: 2			0001 00001	22221		
E	F	G	Н				-9308'. 931 Shoe <u>12,440'</u>		
				OIL WELL TEST					
L	K	J	I		-	bbls.oil,	bbls water in	<u> </u>	Choke n. Size_
				Test After Ad	id or Fracture	· Treatment (after	recovery of volume	e of oil equal to v	olume of
M	N	0	P	load oil used	d): <u>135</u> bb	ols, oil, <u>14</u>	_bbls water in2	Ahrs,min. S	hoke ize _32/6
				GAS WELL TEST	-				·
				Natural Prod.	Test:	MCF/Da	y; Hours flowed	Choke Size	
tubing ,	Casing	and Ceme	nting Record	_			.):		
Size		Feet	Sax	Test After Ad	id or Fracture	Treatment:	MCF/	Day; Hours flowed_	
13-3,	/8*	325	350	Choke Size	Method	of Testing:		·	
				Acid or Fract	ure Treatment	(Give amounts of	naterials used, suc	h as acid, water, o	oil, and
<u>8-5,</u>	/8+4	590	2,300	sand):	11.250	gal. acid	·		
5-1,	/2+1:	2,440	300	Casing	Tubing	□ Date first:	new tanks July	1. 1959	
: : - 2	- 1				er S	ervice Pip	e Line Comp	anv	
1-1,	/2 9	394		l .		abot Carbo	-	<u>-</u>	
lemarks	:			y					
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				-			the best of my know		
pproved	1				, 19		(Company or O	perator),	
	OIL C	ONSER	VATION	COMMISSIO	N	Ву: До	-e (Signature	Gum	da as or ros
	24	-	. 7/2	<u> </u>	f .	Title D f	Lst. Prod.		
_						Send	Communications re	egarding well to:	
itle						NamePerc	y C. O'Quir	ın — — —	
						AddressBOX	4395, Mid	land, Texas	