NEW 'EXICO OIL CONSERVATION COMM' JION Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well

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.

					ODESSA.	TEXAS	AUGU	ST.5, 1	957(Date)
WE ARE	HER	EBY RE	QUESTI	NG AN ALLOWAI	BLE FOR A WEL	L KNOWN	AS:		, , , , , ,
KERR_M	GEE	IL. IN	USTRIE	s, INB. 66	7	ell No	2, in	SW	1/4 SN 1/4
,	COpa	, u. u.	200. /		(Deac)				
Unit	Letter	, Sec	36	, T 13s , R.	37 K , NMP	M.,	EXCENTAN		Poc
************	IEA.			County. Date Sp	udded APRIL 21	1957 Pat	Drilling Go	apleted 7	-23-57
		licate lo		Elevation 3843 Total Depth 12,667 PBTD 12,667					
D	G	В	A	Top Oil/Gas Pay	12, 625	Name of Prod	. Form. DEV	ONIAN	
			"	PRODUCING INTERVAL					
		-		Perforations 12	,625 TO 12,66	5			
E	F	G	H	Open Hole NONE		Depth Casing Shoe	12.667	Depth Tubing	12,600
				OIL WELL TEST -		_			
L	K	J	I		bbls.oil	1 h	ble water in	.	Choke
					Fracture Treatment				
M	N	0	P		192 bbls.oil,				
					<u></u>	DDIS	water in <u>Læ</u>	_hrs,	min. Size_ _10/
		<u> </u>		GAS WELL TEST -					
 -				Natural Prod. Test	.1	_MCF/Day; Hou	rs flowed	Choke	Size
			ting Recor	Method of Testing	(pitot, back pressu	ıre, etc.):			
Size		Feet	Sax	Test After Acid or	Fracture Treatment	::	MCF/:	Day; Hours	flowed
2-3/8	, ,	. 660		Choke Size	Method of Testing	j:			
2-3/	3 12	000		The second secon	reatment (Give amou		.)		
13-3/8	3 3	60	350		GALLONS 15%		iis useu, such	as actu,	water, orr, and
				Casing T	ubing Date	first new	A 27 (327/2 4)		
8-5/8	3 45	97	_800_	1	ress. 525 oil			1957	
5-1/2	2 12	4477	750_	Cil Transporter_S	ERVICE PIPELIN	VE COMPANY	·		
	•	•	/2!!	Gas Transporter					
Remarks:	•••••••	•••••	••••••••	***************************************				•••••••	
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•••••••									
		-		rmation given above					
Approved	***************************************	••••••		, 1	9 KEHR	CONTE OIL	INDUSTRIES Company or Op		•••••
_					. L	Paril.	, <u>Q</u>	Bro	eden
(OIL CO	DNSERV	ATION	COMMISSION	Ву:	rucc	(Signature)	
R			aring Samanakan sa		Title	DIVISION E	NGINEER		
- 7		1			1 Itte		unications re	garding w	ell to:
Title	· · · · · · · · · · · · · · · · · · ·	,,,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••		Nama	J.W. FL	ET CHER		
									T. C
					Address.	BOX 1347	ODE	SA, TE	XAS